Second Regular Session Sixty-eighth General Assembly STATE OF COLORADO

ENGROSSED

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

LLS NO. 12-0356.01 Duane Gall x4335

HOUSE BILL 12-1300

HOUSE SPONSORSHIP

Gardner B., Barker, Ryden, Waller

SENATE SPONSORSHIP

Aguilar,

House Committees

Senate Committees

Judiciary

A BILL FOR AN ACT 101 CONCERNING PROFESSIONAL REVIEW COMMITTEES, AND, IN 102 CONNECTION THEREWITH, IMPLEMENTING THE SUNSET REVIEW 103 RECOMMENDATIONS OF THE DEPARTMENT OF REGULATORY 104 AGENCIES.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at http://www.leg.state.co.us/billsummaries.)

Sunset Process - House Judiciary Committee. The bill implements the recommendations made by the department of regulatory

agencies (DORA) pursuant to DORA's 2011 sunset review report of professional review committees and the committee on anticompetitive conduct.

Sections 1 and 2 of the bill continue the functions of professional review committees for 7 years, until 2019.

Sections 3 to 7 of the bill authorize professional review of physician assistants and advanced practice nurses.

Section 6 of the bill also specifies that the sharing of professional review records and information with regulators and other professional review entities does not waive the professional review privilege or violate applicable confidentiality provisions.

Section 8 of the bill requires entities that conduct professional review of physicians or physician assistants to register with the Colorado medical board and report on their activities, and directs the medical board to publish summary data in aggregated form. Section 9 of the bill requires entities that conduct professional review of the practice of advanced practice nursing to register with the nursing board and report on their activities, and directs the nursing board to publish summary date in aggregated form. If an entity fails to register and report as required, the entity and its governing board lose the qualified immunity that would otherwise apply for acts and omissions occurring during the period of noncompliance.

The bill also corrects inconsistent references to peer review and professional review and makes nonsubstantive clarifications and corrections to statutory language.

SECTION 1. In Colorado Revised Statutes, amend 12-36.5-107
as follows:

12-36.5-107. Repeal of article. This article is repealed, effective
July 1, 2012 SEPTEMBER 1, 2019. Prior to such repeal, THE DEPARTMENT
OF REGULATORY AGENCIES SHALL REVIEW 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.

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

SECTION 2. In Colorado Revised Statutes, 24-34-104, **amend** (43) introductory portion and (50.5) introductory portion; **repeal** (43) (g);

and **add** (50.5) (e) as follows:

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-2-

1	24-34-104. General assembly review of regulatory agencies
2	and functions for termination, continuation, or reestablishment.
3	(43) The following agencies, functions, or both, shall terminate on July
4	1, 2012:
5	(g) The functions of professional review committees pursuant to
6	article 36.5 of title 12, C.R.S.;
7	(50.5) The following agencies, functions, or both, shall terminate
8	on September 1, 2019:
9	(e) THE FUNCTIONS OF PROFESSIONAL REVIEW COMMITTEES
10	PURSUANT TO ARTICLE 36.5 OF TITLE 12, C.R.S.
11	SECTION 3. In Colorado Revised Statutes, amend 12-36.5-101
12	as follows:
13	12-36.5-101. Legislative declaration. (1) The general assembly
14	hereby finds, determines, and declares that the Colorado medical board
15	created pursuant to IN article 36 of this title acts AND THE STATE BOARD
16	OF NURSING CREATED IN ARTICLE 38 OF THIS TITLE ACT for the state in its
17	sovereign capacity to govern licensure, discipline, and professional
18	review of persons licensed to practice medicine, LICENSED AS PHYSICIAN
19	ASSISTANTS, AND LICENSED TO PRACTICE NURSING AND GRANTED AN
20	AUTHORITY AS ADVANCED PRACTICE NURSES, RESPECTIVELY, in this state.
21	The general assembly further finds, determines, and declares that:
22	(a) The authority to practice medicine PROVIDE HEALTH CARE in
23	this state is a privilege granted by the legislative authority of the state; and
24	that
25	(b) It is necessary for the health, safety, and welfare of the people
26	of this state that the Colorado medical board APPROPRIATE REGULATORY
2.7	BOARDS exercise its THEIR authority to protect the people of this state

-3-

1	from the unauthorized practice of medicine and from unprofessional
2	conduct by persons licensed to practice medicine PROVIDE HEALTH CARE
3	under article 36 ARTICLES 36 AND 38 of this title.
4	(2) The general assembly recognizes that:
5	(a) Many patients of persons licensed to practice medicine
6	PROVIDE HEALTH CARE in this state have restricted choices of physicians
7	HEALTH CARE PROVIDERS under a variety of circumstances and
8	conditions;
9	(b) Many patients lack the knowledge, experience, or education
10	to properly evaluate the quality of medical OR NURSING practice or the
11	professional conduct of those licensed to practice medicine, LICENSED TO
12	ACT AS PHYSICIAN ASSISTANTS, AND LICENSED TO PRACTICE NURSING AND
13	GRANTED AN AUTHORITY AS ADVANCED PRACTICE NURSES; and
14	(c) It is necessary and proper that the Colorado medical board
15	RESPECTIVE REGULATORY BOARDS exercise its THEIR regulatory authority
16	to protect the health, safety, and welfare of the people of this state.
17	(3) The general assembly recognizes that, in the proper exercise
18	of its THEIR authority and responsibilities under this article, the Colorado
19	medical board AND THE STATE BOARD OF NURSING must, to some extent,
20	replace competition with regulation, and that such THE replacement of
21	competition by regulation, particularly with regard to physicians PERSONS
22	LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE
23	38 OF THIS TITLE AND GRANTED AN AUTHORITY AS ADVANCED PRACTICE
24	NURSES, is related to a legitimate state interest in the protection of the
25	health, safety, and welfare of the people of this state.
26	SECTION 4. In Colorado Revised Statutes, amend 12-36.5-102
27	as follows:

-4- 1300

1	12-36.5-102. Definitions. As used in this article, unless the
2	context otherwise requires:
3	(1) "Medical board" means the Colorado medical board created
4	pursuant to section 12-36-103. "AUTHORIZED ENTITY" MEANS A
5	CORPORATION, ORGANIZATION, OR ENTITY THAT IS AUTHORIZED TO
6	ESTABLISH A PROFESSIONAL REVIEW COMMITTEE UNDER SECTION
7	12-36.5-104 (3) OR (4) OR UNDER RULES OF THE MEDICAL BOARD OR
8	NURSING BOARD ADOPTED PURSUANT TO SECTION 12-36.5-104 (5).
9	(2) "CMS" MEANS THE FEDERAL CENTERS FOR MEDICARE AND
10	MEDICAID SERVICES.
11	(2.5) "DIVISION" MEANS THE DIVISION OF REGISTRATIONS IN THE
12	DEPARTMENT OF REGULATORY AGENCIES.
13	(2) (3) "Governing board" means any A board, board of trustees,
14	governing board, or other body, or duly authorized subcommittee thereof,
15	of any organization of health care providers AN AUTHORIZED ENTITY,
16	which board or body has final authority pursuant to such organization's
17	THE ENTITY'S written bylaws, policies, or procedures to take final action
18	regarding the recommendations of any authorized A professional review
19	committee.
20	(4) "JOINT COMMISSION" MEANS THE JOINT COMMISSION ON THE
21	ACCREDITATION OF HEALTHCARE ORGANIZATIONS OR ITS SUCCESSOR
22	ENTITY.
23	(5) "MEDICAL BOARD" MEANS THE COLORADO MEDICAL BOARD
24	CREATED IN SECTION 12-36-103 (1).
25	(3) (6) "Professional review committee" means any committee
26	authorized under the provisions of this article to review and evaluate the
27	QUALIFICATIONS, COMPETENCE, AND professional conduct of, and the

-5- 1300

1	quality and appropriateness of patient care provided by, any physician
2	PERSON licensed under article 36 of this title OR LICENSED UNDER ARTICLE
3	38 of this title and granted an authority as an advanced
4	PRACTICE NURSE. "PROFESSIONAL REVIEW COMMITTEE" INCLUDES A
5	GOVERNING BOARD, A HEARING PANEL APPOINTED BY A GOVERNING BODY
6	TO CONDUCT A HEARING UNDER SECTION 12-36.5-104 (7) (a), AND AN
7	INDEPENDENT THIRD PARTY DESIGNATED BY A GOVERNING BOARD UNDER
8	SECTION 12-36.5-104 (8) (b).
9	(4) (7) (a) "Records" means any and all written, ELECTRONIC, or
10	verbal ORAL communications by any person any member of an
11	investigative body, or any professional review committee or governing
12	board, or the staff thereof arising from any activities of a professional
13	review committee, INCLUDING A GOVERNING BOARD, ESTABLISHED BY AN
14	authorized by ENTITY UNDER this article OR BY THE AGENT OR STAFF
15	THEREOF, including the ANY:
16	(I) REFERENCE;
17	(II) Complaint, response, OR correspondence related thereto TO
18	THE COMPLAINT OR RESPONSE;
19	(III) INTERVIEWS OR STATEMENTS, REPORTS, MEMORANDA,
20	ASSESSMENTS, AND PROGRESS REPORTS DEVELOPED TO ASSIST IN
21	PROFESSIONAL REVIEW ACTIVITIES;
22	(IV) ASSESSMENTS AND PROGRESS REPORTS TO ASSIST IN
23	PROFESSIONAL REVIEW ACTIVITIES, INCLUDING REPORTS AND
24	ASSESSMENTS DEVELOPED BY INDEPENDENT CONSULTANTS IN
25	CONNECTION WITH PROFESSIONAL REVIEW ACTIVITIES; AND
26	(V) Recordings or transcripts of proceedings, minutes, formal
27	recommendations decisions exhibits and other similar items or

-6- 1300

1	documents RELATED TO PROFESSIONAL REVIEW ACTIVITIES AND typically
2	constituting the records of administrative proceedings.
3	(b) "RECORDS" DOES NOT INCLUDE ANY WRITTEN, ELECTRONIC, OR
4	ORAL COMMUNICATIONS BY ANY PERSON THAT ARE OTHERWISE
5	AVAILABLE FROM AN ORIGINAL SOURCE OUTSIDE THE SCOPE OF
6	PROFESSIONAL REVIEW ACTIVITIES, INCLUDING MEDICAL RECORDS AND
7	OTHER HEALTH INFORMATION.
8	(8) "STATE BOARD OF NURSING" OR "NURSING BOARD" MEANS THE
9	STATE BOARD OF NURSING CREATED IN SECTION 12-38-104.
10	SECTION 5. In Colorado Revised Statutes, amend 12-36.5-103
11	as follows:
12	12-36.5-103. Use of professional review committees.
13	(1) (a) The general assembly recognizes that:
14	(I) The medical board AND THE NURSING BOARD, while assuming
15	and retaining ultimate authority for licensure and discipline in accordance
16	with article ARTICLES 36 AND 38 of this title, RESPECTIVELY, and in
17	accordance with this article, cannot practically and economically assume
18	responsibility over every single allegation or instance of purported
19	deviation from the standards of quality for the practice of medicine OR
20	NURSING, from the standards of professional conduct, or from the
21	standards of appropriate care; and that
22	(II) An attempt to exercise such oversight would result in
23	extraordinary delays in the determination of the legitimacy of such THE
24	allegations and would result in the inappropriate and unequal exercise of
25	its THEIR authority to license and discipline physicians PERSONS LICENSED
26	UNDER ARTICLE $\overline{36}$ OF THIS TITLE OR LICENSED UNDER ARTICLE $\overline{38}$ OF THIS
27	TITLE AND CDANTED ALITHODITY AS ADVANCED DDACTICE NUDGES

-7- 1300

(b) It is therefore the intent of the general assembly that the medical board AND THE NURSING BOARD utilize and allow professional review committees and governing boards to assist it THEM in meeting its THEIR responsibilities under article ARTICLES 36 AND 38 of this title, RESPECTIVELY, and under this article.

- (2) All physicians Persons Licensed under article 36 of this title or Licensed under article 38 of this title and granted authority as advanced practice nurses are encouraged to serve upon such professional review committees when called to do so and to study and review in good faith an objectively reasonable manner the professional conduct of physicians persons Licensed under article 36 of this title or Licensed under article 38 of this title and granted authority as advanced practice nurses, including the Qualifications, competence, and professional conduct of, and the quality and appropriateness of patient care provided by, those persons.
- (3) (a) The use of professional review committees is declared to be an extension of the authority of the medical board AND NURSING BOARD. However, except as otherwise provided in this article, nothing in this article shall limit LIMITS the authority of professional review committees properly constituted under this article.
- (b) Professional review committees, the members who constitute such THE committees, governing boards, AUTHORIZED ENTITIES, and persons who participate directly or indirectly in professional review proceedings ACTIVITIES are granted certain immunities from SUIT AND liability FOR DAMAGES arising from actions which THAT are within the scope of their activities and taken in good faith as provided in section

-8-

I	12-36.5-105. Such THESE grants of immunity from SUIT AND liability FOR
2	DAMAGES are declared to be necessary to ensure that professional review
3	committees and governing boards can exercise their professional
4	knowledge and judgment.
5	SECTION 6. In Colorado Revised Statutes, amend 12-36.5-104
6	as follows:
7	12-36.5-104. Establishment of professional review committees
8	- function - rules. (1) A professional review committee may be
9	established pursuant to this section to review and evaluate the
10	QUALIFICATIONS AND COMPETENCE OF, THE quality and appropriateness
11	of patient care provided by, and the professional conduct of, any
12	physician licensed under article 36 of this title PERSON LICENSED UNDER
13	ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE
14	AND GRANTED AN AUTHORITY AS AN ADVANCED PRACTICE NURSE.
15	(2) Persons Licensed to practice medicine under article 36 of this
16	title PHYSICIANS who are actively engaged in the practice of medicine in
17	this state shall MUST constitute a majority of THE VOTING MEMBERS OF any
18	professional review committee established pursuant to this section FOR
19	PHYSICIANS AND PHYSICIAN ASSISTANTS; except for those boards THAT
20	PHYSICIANS NEED NOT CONSTITUTE THE MAJORITY OF THE VOTING
21	MEMBERS OF A BOARD authorized by paragraph (g) of subsection (4) of
22	this section OR AN INDEPENDENT THIRD PARTY DESIGNATED BY A
23	GOVERNING BOARD UNDER PARAGRAPH (b) OF SUBSECTION (8) OF THIS
24	SECTION.
25	(2.5) A PROFESSIONAL REVIEW COMMITTEE THAT IS REVIEWING
26	THE QUALIFICATIONS AND COMPETENCE OF, THE QUALITY AND
27	A PDROPRIATENESS OF PATIENT CARE PROVIDED BY OR THE PROFESSIONAL

-9-

1	CONDUCT OF, A PERSON LICENSED UNDER ARTICLE 38 OF THIS TITLE AND
2	GRANTED AUTHORITY AS AN ADVANCED PRACTICE NURSE MUST EITHER:
3	(a) HAVE, AS A VOTING MEMBER, AT LEAST ONE PERSON LICENSED
4	UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS AN
5	ADVANCED PRACTICE NURSE WITH A SCOPE OF PRACTICE SIMILAR TO THAT
6	OF THE PERSON WHO IS THE SUBJECT OF THE REVIEW; OR
7	(b) Engage, to perform an independent review as
8	APPROPRIATE, AN INDEPENDENT PERSON LICENSED UNDER ARTICLE 38 OF
9	THIS TITLE AND GRANTED AUTHORITY AS AN ADVANCED PRACTICE NURSE
10	WITH A SCOPE OF PRACTICE SIMILAR TO THAT OF THE PERSON WHO IS THE
11	SUBJECT OF THE REVIEW.
12	(3) A utilization and quality control peer review organization, as
13	defined pursuant to 42 U.S.C. sec. 1320c-1, or any other organization
14	performing similar review services under federal or state law shall be IS
15	an approved professional review committee under this article.
16	(4) Any A professional review committee established by any of
17	the following organizations, entities, or professional societies shall be
18	AUTHORIZED ENTITIES IS an approved professional review committee
19	under this article if it operates pursuant to IN SUBSTANTIAL COMPLIANCE
20	WITH written bylaws, policies, or procedures that are in compliance with
21	this article and that have been approved by its THE AUTHORIZED ENTITY'S
22	governing board and if, at all times after July 1, 2013, it is
23	REGISTERED WITH THE DIVISION IN ACCORDANCE WITH SECTION
24	12-36.5-104.6:
25	(a) The medical staff of a hospital licensed pursuant to part 1 of
26	article 3 of title 25, C.R.S., or certified pursuant to section 25-1.5-103 (1)
27	(a) (II), C.R.S.;

-10-

	(b)	Th	ie me	dical	staff (of a h	osp	ital-r	elate	d co	orpo	ratio	on. F	or i	the
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- (c) A society or association of physicians whose membership includes not less than one-third of the doctors of medicine or doctors of osteopathy licensed to practice and residing in this state, if the physician whose services are the subject of the review is a member of such THE society or association;
- (c.5) A SOCIETY OR ASSOCIATION OF ADVANCED PRACTICE NURSES LICENSED AND REGISTERED PURSUANT TO ARTICLE 38 OF THIS TITLE AND RESIDING IN THIS STATE, IF THE ADVANCED PRACTICE NURSE WHOSE SERVICES ARE THE SUBJECT OF THE REVIEW IS A MEMBER OF THE SOCIETY OR ASSOCIATION;
- (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 as the A specialty society or association representative of physicians practicing such THE specific discipline of medicine, if the physician whose services are the subject of the review is a member of such THE specialty society or association;
- (d.5) A SOCIETY OR ASSOCIATION OF ADVANCED PRACTICE NURSES LICENSED AND REGISTERED PURSUANT TO ARTICLE 38 OF THIS TITLE AND PRACTICING IN A SPECIFIED NURSING ROLE AND POPULATION FOCUS, AS DEFINED BY THE NURSING BOARD, WHICH SOCIETY OR ASSOCIATION HAS BEEN DESIGNATED BY THE NURSING BOARD AS THE SPECIFIC NURSING

-11-

SOCIETY	OR	ASSOCIA	ATION	REPRE	SENT	ATIVE	OF	THOSE	ADV	ANCED
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SOCIETY (OR A	SSOCIAT	ION.							

- (e) An individual practice association or a preferred provider organization comprised CONSISTING of at least twenty-five physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE, OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES, or a medical group which THAT predominantly serves members of a health maintenance organization licensed pursuant to parts 1 and 4 of article 16 of title 10, C.R.S. A professional review committee established pursuant to this paragraph (e) shall have HAS jurisdiction to review only physicians who are members of the association or organization creating and authorizing that committee; except that such THE professional review committee may review the care provided to a particular patient referred by a member of such THE association or organization to another physician who is not a member of such THE association or organization.
- (f) A corporation authorized to insure physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES pursuant to article 3 of title 10, C.R.S., or any other corporation ORGANIZATION authorized to insure such physicians PERSONS in this state when designated by the medical board OR NURSING BOARD under subsection (5) of this section;
 - (g) THE governing boards BOARD of any AUTHORIZED entity which

-12-

THAT has a professional review committee established pursuant to article 36 OR ARTICLE 38 of this title;

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- (h) Any peer PROFESSIONAL review committee established or created by a combination or pooling of any of the organizations authorized by this section to have a professional review committee ENTITIES;
- A nonprofit corporation or association comprised (i) (I) CONSISTING of representatives from a statewide medical PROFESSIONAL society and a statewide hospital association. Such THE association shall be comprised MUST CONSIST of physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES, hospital administrators, and hospital trustees, with a majority of such THE representatives being physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES. The association may establish, or contract for, one or more peer PROFESSIONAL review committees to review the care by hospital staff physicians HEALTH CARE PROVIDERS, with priority given to small rural medical HOSPITAL staffs. Such peer THESE PROFESSIONAL review services shall MUST be available statewide on a fee-for-service basis to licensed or certified hospitals at the joint request of the governing body BOARD and the medical OR NURSING staff of the hospital or at the sole request of the governing body BOARD of the hospital. If a physician MEMBER being reviewed specializes in a generally recognized specialty of medicine OR NURSING, at least one of the physicians HEALTH CARE PROVIDERS on the peer PROFESSIONAL review committee shall MUST be a physician practicing PERSON LICENSED

-13-

1	UNDER ARTICLE 36 OF THIS TITLE, OR LICENSED UNDER ARTICLE 38 OF THIS
2	TITLE AND GRANTED AUTHORITY AS AN ADVANCED PRACTICE NURSE, WHO
3	PRACTICES such specialty.
4	(II) For purposes of the introductory portion to this subsection (4)
5	AND THIS PARAGRAPH (i), the bylaws, policies, and OR procedures shall
6	MUST be in SUBSTANTIAL compliance with this article and be approved by
7	the nonprofit corporation or association.
8	(j) The medical OR NURSING staff of an ambulatory surgical center
9	licensed pursuant to part 1 of article 3 of title 25, C.R.S.;
10	(k) A PROFESSIONAL SERVICES ENTITY ORGANIZED PURSUANT TO
11	SECTION 12-36-134;
12	(1) A PROVIDER NETWORK THAT INCLUDES HEALTH CARE
13	PROVIDERS ORGANIZED PURSUANT TO PART 3 OF ARTICLE 18 OF TITLE 6,
14	C.R.S.;
15	(m) A HEALTH SYSTEM THAT INCLUDES TWO OR MORE
16	AUTHORIZED ENTITIES WITH A COMMON GOVERNING BOARD;
17	(n) A TRUST ORGANIZATION ESTABLISHED UNDER ARTICLE 70 OF
18	TITLE 11, C.R.S.;
19	(o) AN ENTITY LICENSED PURSUANT TO PARTS 1 AND 4 OF ARTICLE
20	16 OF TITLE 10, C.R.S.;
21	(p) AN ACCOUNTABLE CARE ORGANIZATION ESTABLISHED UNDER
22	THE FEDERAL "PATIENT PROTECTION AND AFFORDABLE CARE ACT",
23	Pub.L. 111-148, or other organization with a similar function;
24	AND
25	(q) A HOSPITAL LICENSED PURSUANT TO PART 1 OF ARTICLE 3 OF
26	TITLE 25, C.R.S., OR CERTIFIED PURSUANT TO SECTION 25-1.5-103 (1) (a)
27	(II), C.R.S.

-14-

1	(5) The medical board AND THE NURSING BOARD, WITH RESPECT
2	TO THE LICENSEES SUBJECT TO THEIR JURISDICTION, may establish by rule
3	procedures necessary to authorize other health care or physician
4	organizations or professional societies to AS AUTHORIZED ENTITIES THAT
5	MAY establish professional review committees.
6	(6) (a) A professional review committee acting pursuant to this
7	part 1 may investigate or cause to be investigated:
8	(I) The qualifications AND COMPETENCE of any physician licensed
9	under article 36 of this title PERSON LICENSED UNDER ARTICLE 36 OF THIS
10	TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED
11	AUTHORITY AS AN ADVANCED PRACTICE NURSE who seeks to subject
12	himself or herself to the authority of any organization, entity, or
13	professional society listed in subsection (4) of this section or any
14	organization or professional society that has been authorized by the
15	medical board to establish a professional review committee pursuant to
16	subsection (5) of this section AUTHORIZED ENTITY; or
17	(II) The quality or appropriateness of patient care rendered by, or
18	the professional conduct of, any physician licensed under article 36 of this
19	title Person Licensed under article 36 of this title or licensed
20	UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS AN
21	ADVANCED-PRACTICE NURSE who is subject to the authority of such
22	organization, entity, or professional society THE AUTHORIZED ENTITY.
23	(b) Such The Professional Review Committee shall conduct
24	THE investigation shall be conducted in SUBSTANTIAL conformity with
25	written bylaws, policies, or procedures adopted by such organization,
26	entity, or professional society THE AUTHORIZED ENTITY'S GOVERNING
27	BOARD.

-15- 1300

1	(7) The written bylaws, policies, or procedures of any professional
2	review committee shall for Persons Licensed under Article 36 of this
3	TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED
4	AUTHORITY AS ADVANCED PRACTICE NURSES MUST provide for at least the
5	following:
6	(a) (I) EXCEPT AS PROVIDED IN SUBPARAGRAPH (II) OF THIS
7	PARAGRAPH (a), if the findings of any investigation indicate that the
8	physician A PERSON LICENSED UNDER ARTICLE 36 OF THIS TITLE OR
9	LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS
10	AN ADVANCED PRACTICE NURSE, AND who is the subject of the
11	investigation, is lacking in qualifications OR COMPETENCY, has provided
12	substandard or inappropriate patient care, or has exhibited inappropriate
13	professional conduct AND THE PROFESSIONAL REVIEW COMMITTEE TAKES
14	OR RECOMMENDS AN ACTION TO ADVERSELY AFFECT THE PERSON'S
15	MEMBERSHIP, AFFILIATION, OR PRIVILEGES WITH THE AUTHORIZED ENTITY,
16	the professional review committee shall hold a hearing unless the
17	physician waives his right to a hearing, to consider the findings except
18	that, AND RECOMMENDATIONS UNLESS THE PERSON WAIVES, IN WRITING,
19	THE RIGHT TO A HEARING.
20	(II) If the professional review committee is submitting its findings
21	AND RECOMMENDATIONS to another professional review committee for
22	review, only one hearing shall be IS necessary prior to any appeal before
23	the governing body BOARD.
24	(b) Any A person who has participated in the course of any AN
25	investigation shall be IS disqualified as a member of the PROFESSIONAL
26	REVIEW committee at any THAT CONDUCTS A hearing held pursuant to
27	paragraph (a) of this subsection (7), but such THE person may participate

-16-

as a witness in such THE hearing.

- (c) The physician who is the subject of any investigation, shall be given reasonable notice of such hearing AUTHORIZED ENTITY SHALL GIVE TO THE SUBJECT OF ANY INVESTIGATION UNDER THIS SUBSECTION (7) REASONABLE NOTICE OF THE HEARING, AND OF ANY FINDING OR RECOMMENDATION THAT WOULD ADVERSELY AFFECT THE PERSON'S MEMBERSHIP, AFFILIATION, OR PRIVILEGES WITH THE AUTHORIZED ENTITY, and shall have THE SUBJECT OF THE INVESTIGATION HAS a right to be present, to be represented by legal counsel at such THE hearing, and to offer evidence in his OR HER own behalf.
 - (d) After such THE hearing, the professional review committee THAT CONDUCTED THE HEARING shall make any recommendations it deems necessary to the governing board, unless OTHERWISE provided by federal law or regulation.
 - (e) The Professional Review Committee shall give a copy of such the recommendations shall be given to the subject physician Of the Investigation, who then shall have has the right to appeal the findings and recommendations of the professional review committee to the governing board to which the recommendations are made with regard to any finding or recommendation that would adversely affect his or her membership, affiliation, or privileges with the authorized entity.
 - (f) THE PROFESSIONAL REVIEW COMMITTEE SHALL FORWARD a copy of any recommendations made pursuant to paragraph (d) of this subsection (7) shall be promptly forwarded to the medical board IF THE SUBJECT OF THE INVESTIGATION IS LICENSED UNDER ARTICLE 36 OF THIS TITLE, OR TO THE NURSING BOARD IF THE SUBJECT OF THE INVESTIGATION

-17-

1	IS LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY
2	AS AN ADVANCED PRACTICE NURSE.
3	(8) (a) All governing boards shall adopt written bylaws, policies
4	or procedures UNDER which provide that a physician PERSON LICENSED
5	UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS
6	TITLE AND GRANTED AUTHORITY AS AN ADVANCED PRACTICE NURSE who
7	is the subject of an adverse recommendation by a professional review
8	committee may appeal to the governing board Such FOLLOWING A
9	HEARING IN ACCORDANCE WITH SUBSECTION (7) OF THIS SECTION. THE
10	bylaws, policies, or procedures shall MUST provide that the physician shall
11	PERSON be given reasonable notice of his OR HER right to appeal and
12	unless waived by the physician shall have OR PHYSICIAN ASSISTANT, HAS
13	the right to appear before the governing board, to be represented by lega
14	counsel, and to offer such THE argument on the record as he OR SHI
15	deems appropriate.
16	(b) The bylaws may provide that a committee of not fewer than
17	three members of the governing board may hear the appeal. such ALSO
18	THE bylaws may also allow for an appeal to be heard by an independen
19	third party designated by the AGOVERNING board UNDER THIS PARAGRAPH
20	(b).
21	(9) All governing boards that are required to report their final
22	actions to the medical board OR THE NURSING BOARD, AS APPROPRIATE
23	are not otherwise relieved of such THEIR obligations by virtue of any
24	provision of this article.
25	(10) (a) EXCEPT AS SPECIFIED IN PARAGRAPH (b) OF THIS
26	SUBSECTION (10), the records of $\frac{1}{2}$ AN AUTHORIZED ENTITY AND ITS
27	professional review committee, a ITS governing board, or the committee

-18-

1	on anticompetitive conduct shall ARE not be subject to subpoena or
2	discovery and shall ARE not be admissible in any civil suit. brought
3	against a physician who is the subject of such records.
4	(b) Notwithstanding the provisions of paragraph (a) of this
5	subsection (10), such Subject to subsection (13) of this section, the
6	records shall be ARE subject to subpoena and available for use:
7	(I) By the committee on anticompetitive conduct;
8	(II) By either party in any AN appeal or de novo proceeding
9	brought pursuant to this part 1;
10	(III) By a physician Person Licensed under Article 36 of this
11	TITLE, OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED
12	AUTHORITY AS AN ADVANCED PRACTICE NURSE, in a suit seeking judicial
13	review of any AN action by the governing board;
14	(IV) BY THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND
15	ENVIRONMENT IN ACCORDANCE WITH ITS AUTHORITY TO ISSUE OR
16	CONTINUE A HEALTH FACILITY LICENSE OR CERTIFICATION FOR AN
17	AUTHORIZED ENTITY;
18	(V) BY THE CMS IN ACCORDANCE WITH ITS EVALUATION PROCESS
19	FOR FEDERAL HEALTH CARE PROGRAM PARTICIPATION BY AN AUTHORIZED
20	ENTITY;
21	(IV) (VI) By a governing board seeking judicial review;
22	(VII) BY THE MEDICAL BOARD WITHIN THE SCOPE OF ITS
23	AUTHORITY OVER LICENSED PHYSICIANS AND PHYSICIAN ASSISTANTS; AND
24	(VIII) BY THE NURSING BOARD WITHIN THE SCOPE OF ITS
25	AUTHORITY OVER ADVANCED PRACTICE NURSES.
26	(11) (a) EXCEPT AS PROVIDED IN PARAGRAPH (b) OF THIS
27	SUBSECTION (11). THE RECORDS OF AN AUTHORIZED ENTITY OR ITS

-19-

1	PROFESSIONAL REVIEW COMMITTEE MAY BE DISCLOSED TO:
2	(I) THE MEDICAL BOARD, AS REQUESTED BY THE MEDICAL BOARD
3	ACTING WITHIN THE SCOPE OF ITS AUTHORITY OR AS REQUIRED OR
4	APPROPRIATE UNDER THIS ARTICLE OR ARTICLE 36 OF THIS TITLE;
5	(II) THE NURSING BOARD, AS REQUESTED BY THE NURSING BOARD
6	ACTING WITHIN THE SCOPE OF ITS AUTHORITY OR AS REQUIRED OR
7	APPROPRIATE UNDER THIS ARTICLE OR ARTICLE 38 OF THIS TITLE;
8	(III) THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND
9	ENVIRONMENT ACTING WITHIN THE SCOPE OF ITS HEALTH FACILITY
10	LICENSING AUTHORITY OR AS THE AGENT OF CMS;
11	(IV) CMS, IN CONNECTION WITH THE SURVEY AND CERTIFICATION
12	PROCESSES FOR FEDERAL HEALTH CARE PROGRAM PARTICIPATION BY AN
13	AUTHORIZED ENTITY; AND
14	(V) THE JOINT COMMISSION OR OTHER ENTITY GRANTED DEEMING
15	AUTHORITY BY CMS, IN CONNECTION WITH A SURVEY OR REVIEW FOR
16	ACCREDITATION.
17	(b) THE MEDICAL BOARD, NURSING BOARD, AND COLORADO
18	DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT SHALL NOT MAKE
19	FURTHER DISCLOSURES OF ANY RECORDS DISCLOSED BY AN AUTHORIZED
20	ENTITY OR ITS PROFESSIONAL REVIEW COMMITTEE UNDER THIS SECTION.
21	(12) The records of an authorized entity or its
22	PROFESSIONAL REVIEW COMMITTEE OR GOVERNING BOARD MAY BE
23	SHARED BY AND AMONG AUTHORIZED ENTITIES AND THEIR PROFESSIONAL
24	REVIEW COMMITTEES AND GOVERNING BOARDS CONCERNING THE
25	QUALIFICATIONS, COMPETENCE, AND PROFESSIONAL CONDUCT OF, AND
26	QUALITY AND APPROPRIATENESS OF PATIENT CARE PROVIDED BY, A
27	HEALTH CARE PROVIDER WHO SEEKS TO SUBJECT HIMSELF OR HERSELF TO,

-20-

1	OR IS CURRENTLY SUBJECT TO, THE AUTHORITY OF THE AUTHORIZED
2	ENTITY.
3	(13) RESPONDING TO A SUBPOENA OR DISCLOSING OR SHARING OF
4	OTHERWISE PRIVILEGED RECORDS AND INFORMATION PURSUANT TO
5	SUBSECTION (10) , (11) , or (12) of this section does not constitute a
6	WAIVER OF THE PRIVILEGE SPECIFIED IN PARAGRAPH (a) OF SUBSECTION
7	(10) OF THIS SECTION OR A VIOLATION OF THE CONFIDENTIALITY
8	REQUIREMENTS OF SUBSECTION (14) OF THIS SECTION. RECORDS PROVIDED
9	TO ANY GOVERNMENTAL AGENCY, INCLUDING THE DEPARTMENT OF PUBLIC
10	HEALTH AND ENVIRONMENT, THE MEDICAL BOARD, AND THE NURSING
11	BOARD PURSUANT TO SUBSECTION (10) OR (11) OF THIS SECTION ARE NOT
12	PUBLIC RECORDS SUBJECT TO THE "COLORADO OPEN RECORDS ACT", PART
13	2 OF ARTICLE 72 OF TITLE 24, C.R.S. A PERSON PROVIDING THE RECORDS
14	TO AN AUTHORIZED ENTITY OR ITS PROFESSIONAL REVIEW COMMITTEE OR
15	GOVERNING BOARD, THE DEPARTMENT OF PUBLIC HEALTH AND
16	ENVIRONMENT, THE MEDICAL BOARD, THE NURSING BOARD, CMS, THE
17	JOINT COMMISSION, OR OTHER GOVERNMENTAL AGENCY IS ENTITLED TO
18	THE SAME IMMUNITY FROM SUIT AND LIABILITY FOR DAMAGES AS
19	PROVIDED UNDER SECTION 12-36.5-105 FOR THE DISCLOSURE OF THE
20	RECORDS.
21	(11) At the request of the medical board, a governing board shall
22	provide the medical board with the complete record of all professional
23	review proceedings, including, but not limited to, the findings,
24	recommendations, and actions taken.
25	(12) (14) Investigations, examinations, hearings, meetings, or any
26	AND other proceedings of a professional review committee or governing
27	board conducted pursuant to the provisions of this part 1 shall be ARE

-21-

1	exempt from the provisions of any law requiring that proceedings be
2	conducted publicly or that the minutes or records, INCLUDING ANY
3	MINUTES, be open to public inspection.
4	(13) (15) Except as otherwise provided in subsection (10),
5	(11), OR (12) OF THIS SECTION, all proceedings, recommendations, records,
6	and reports involving professional review committees or governing
7	boards shall be ARE confidential.
8	(14) (16) A professional review committee or governing board
9	which THAT is constituted and conducts its reviews and activities pursuant
10	to the provisions of SUBSTANTIALLY IN ACCORDANCE WITH this part 1 is
11	declared not to be an unlawful conspiracy in violation of section 6-4-104
12	or 6-4-105, C.R.S.
13	SECTION 7. In Colorado Revised Statutes, 12-36.5-104.4,
14	amend (1) as follows:
15	12-36.5-104.4. Hospital professional review committees.
16	(1) The quality and appropriateness of patient care rendered by
17	physicians Persons Licensed under Article 36 of this title, Licensed
18	UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS
19	ADVANCED PRACTICE NURSES, and other licensed health care professionals
20	so influence the total quality of patient care that a review of care provided
21	in a hospital is ineffective without concomitantly reviewing THE overall
22	QUALIFICATIONS, COMPETENCE, AND PROFESSIONAL CONDUCT OF, AND
23	THE quality and appropriateness of care rendered by, physicians and other
24	licensed health care professionals SUCH PERSONS.
25	SECTION 8. In Colorado Revised Statutes, add 12-36.5-104.6
26	as follows:
27	12-36.5-104.6. Governing boards to register with division -

-22- 1300

1	annual reports - aggregation and publication of data - rules.
2	(1) EACH GOVERNING BOARD THAT ESTABLISHES OR USES ONE OR MORE
3	PROFESSIONAL REVIEW COMMITTEES TO REVIEW THE PRACTICE OF
4	PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER
5	ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED
6	PRACTICE NURSES SHALL:
7	(a) REGISTER WITH THE DIVISION IN A FORM SATISFACTORY TO THE
8	MEDICAL BOARD ON OR BEFORE JULY 1, 2013, IF THE GOVERNING BOARD
9	HAS EXISTING PROFESSIONAL REVIEW COMMITTEES, OR, IF THE GOVERNING
10	BOARD ESTABLISHES A PROFESSIONAL REVIEW COMMITTEE ON OR AFTER
11	July 1, 2013, within thirty days after approving the written
12	BYLAWS, POLICIES, OR PROCEDURES FOR THE PROFESSIONAL REVIEW
13	COMMITTEE; AND
14	(b) (I) REPORT ON ITS PROFESSIONAL REVIEW ACTIVITIES DURING
15	THE IMMEDIATELY PRECEDING CALENDAR YEAR IN A FORM SATISFACTORY
16	TO THE DIVISION. THESE REPORTS MUST INCLUDE AGGREGATE DATA ON
17	THE NUMBER AND TYPE OF CASES REVIEWED AND THE RESULTS OF SUCH
18	REVIEWS. AS USED IN THIS PARAGRAPH (b), "AGGREGATE DATA"
19	INCLUDES, WITHOUT LIMITATION, NONIDENTIFIABLE INFORMATION ABOUT
20	PROFESSIONAL REVIEW ACTIVITIES CONDUCTED BY THE AUTHORIZED
21	PROFESSIONAL REVIEW ENTITY THAT IS NOT OTHERWISE REPORTABLE
22	PURSUANT TO FEDERAL OR STATE LAW.
23	(II) THE DIVISION SHALL NOT PUBLISH ANY INFORMATION
24	IDENTIFYING THE PROFESSIONAL REVIEW COMMITTEE OR AUTHORIZED
25	ENTITY MAKING A REPORT UNDER THIS PARAGRAPH (b), AND THE IDENTITY
26	INFORMATION IS NOT A PUBLIC RECORD UNDER THE "COLORADO OPEN
27	RECORDS ACT", PART 2 OF ARTICLE 72 OF TITLE 24, C.R.S.

-23-

1	(III) REPORTS SUBMITTED PURSUANT TO THIS PARAGRAPH (b)
2	MUST INCLUDE ONLY INVESTIGATIONS IN WHICH NO FINAL ACTION
3	ADVERSELY AFFECTING THE SUBJECT OF THE INVESTIGATION, AS
4	"ADVERSELY AFFECTING" IS DEFINED IN 45 CFR 60.3, WAS TAKEN OR
5	RECOMMENDED.
6	(2) (a) The division shall publish the data provided
7	PURSUANT TO PARAGRAPH (b) OF SUBSECTION (1) OF THIS SECTION IN
8	AGGREGATE FORM AND WITHOUT INDIVIDUALLY IDENTIFIABLE
9	INFORMATION CONCERNING THE LICENSED PROFESSIONALS SUBJECT TO
10	REVIEW.
11	(b) THE DIVISION SHALL MAINTAIN AND SHALL PUBLISH ON LINE,
12	THROUGH ITS WEB SITE, A CURRENT LIST OF ALL PROFESSIONAL REVIEW
13	COMMITTEES THAT ARE REGISTERED IN ACCORDANCE WITH THIS SECTION
14	AND THAT OTHERWISE ARE IN COMPLIANCE WITH THIS ARTICLE.
15	(3) THE DIVISION SHALL ADOPT RULES TO IMPLEMENT THIS
16	SECTION AND MAY COLLECT A REASONABLE REGISTRATION FEE TO
17	RECOVER ITS DIRECT AND INDIRECT COSTS OF ADMINISTERING THE
18	REGISTRATION AND PUBLICATION SYSTEMS REQUIRED BY THIS SECTION.
19	SECTION 9. In Colorado Revised Statutes, amend 12-36.5-105
20	as follows:
21	12-36.5-105. Immunity from suit and liability. (1) A member
22	of a professional review committee, GOVERNING BOARD, HEARING PANEL,
23	OR INDEPENDENT THIRD PARTY DESIGNATED BY A GOVERNING BOARD
24	UNDER SECTION 12-36.5-104 (8) (b); A PERSON SERVING ON THE STAFF OF
25	THAT COMMITTEE, BOARD, PANEL, OR THIRD PARTY; a witness OR
26	CONSULTANT before a professional review committee; or AND any person
27	who files a complaint or otherwise participates in the professional review

-24- 1300

process shall be IS immune from suit in any civil or criminal action, including antitrust actions, brought by a physician who is the subject of the review by such professional review committee, if such member made a reasonable effort to obtain the facts of the matter as to which he acted, acted in the reasonable belief that the action taken by him was warranted by the facts, and otherwise acted in good faith within the scope of such professional review committee process and if such witness or participant acted in good faith within the scope of such professional review committee process AND IS IMMUNE FROM LIABILITY FOR DAMAGES UNLESS, IN CONNECTION WITH THE PROFESSIONAL REVIEW PROCESS, THE PERSON PROVIDED FALSE INFORMATION AND KNEW THAT THE INFORMATION WAS FALSE.

and the AUTHORIZED entity that has established a peer PROFESSIONAL review committee pursuant to section 12-36.5-104 the board's staff, any person acting as a witness or consultant to the board, any witness testifying in a proceeding authorized under this article, and any person who lodges a complaint pursuant to this article shall be immune from liability in any civil action brought against him or her for acts occurring while acting in his or her capacity as board member, staff, consultant, or witness, respectively, if such individual was acting in good faith within the scope of his or her respective capacity, made a reasonable effort to obtain the facts of the matter as to which he or she acted, and acted in the reasonable belief that the action taken by him or her was warranted by the facts. Any person participating in good faith in lodging a complaint or participating in any investigative or administrative proceeding pursuant to this article shall be immune from any civil or criminal liability that may

-25-

1	result from such participation IS IMMUNE FROM SUIT IN ANY CIVIL OR
2	CRIMINAL ACTION, INCLUDING ANTITRUST ACTIONS, AND IS IMMUNE FROM
3	LIABILITY FOR DAMAGES IF THE PROFESSIONAL REVIEW ACTION WAS
4	TAKEN WITHIN THE SCOPE OF THE PROFESSIONAL REVIEW PROCESS AND
5	WAS TAKEN:
6	(a) IN THE OBJECTIVELY REASONABLE BELIEF THAT THE ACTION
7	WAS IN THE FURTHERANCE OF QUALITY HEALTH CARE;
8	(b) AFTER AN OBJECTIVELY REASONABLE EFFORT TO OBTAIN THE
9	FACTS OF THE MATTER;
10	(c) IN THE OBJECTIVELY REASONABLE BELIEF THAT THE ACTION
11	TAKEN WAS WARRANTED BY THE FACTS; AND
12	(d) IN ACCORDANCE WITH PROCEDURES THAT, UNDER THE
13	CIRCUMSTANCES, WERE FAIR TO THE PERSON LICENSED UNDER ARTICLE $\overline{36}$
14	OF THIS TITLE OR LICENSED UNDER ARTICLE $\overline{38}$ OF THIS TITLE AND
15	GRANTED AN AUTHORITY AS AN ADVANCED PRACTICE NURSE.
16	SECTION 10. In Colorado Revised Statutes, 12-36.5-106,
17	amend (2), (5), (7), (8), (9) introductory portion, (9) (a), (9) (b), (9) (e),
18	(9) (f), (9) (k), (9) (n), (10), (12), and (13) as follows:
19	12-36.5-106. Committee on anticompetitive conduct - rules.
20	(2) The committee shall be composed CONSISTS of five persons, none of
21	whom shall be IS a member of the medical board, APPOINTED AS
22	FOLLOWS:
23	(a) THE MEDICAL BOARD SHALL APPOINT four members of the
24	committee, shall WHO MUST be licensed to practice medicine UNDER
25	ARTICLE $\overline{36}$ of this title, or licensed under article $\overline{38}$ of this title
26	AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES, and actively
27	engaged in the practice of medicine PRACTICING in this state. and shall be

-26-

appointed by the medical board. No A member APPOINTED PURSUANT TO THIS PARAGRAPH (a) shall NOT practice in the same medical subspecialty as any other member nor AND SHALL NOT conduct his or her primary practice in the same county as any other member.

- (b) THE GOVERNOR SHALL APPOINT one member shall be appointed by the governor and shall be WHO IS an attorney licensed to practice in this state AND who has particular expertise and experience in the area of antitrust law.
- among its members. Any three members of the committee shall constitute a quorum. Any action of a majority of those present comprising such THE quorum shall be Is the action of the committee. Committee members shall be ARE compensated as provided in section 24-34-102 (13), C.R.S. The committee may in its discretion, utilize the expertise of consultants, including but not limited to, legal, medical, and business specialists. THE COMMITTEE SHALL ASSESS AND COLLECT costs of such THE consultants shall be assessed and collected as provided in subsection (11) of this section.
- (7) Any physician A PERSON LICENSED UNDER ARTICLE 36 OF THIS TITLE, OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS AN ADVANCED PRACTICE NURSE, AND who is the subject of a final action by a governing board, which action results in the denial, termination, or restriction of privileges at or membership in or participation in an organization, and who believes that such THE action resulted from unreasonable anticompetitive conduct shall have, as his sole and exclusive remedy, MAY SEEK direct review of the record by the committee. such THE review, shall be WHICH IS THE PERSON'S EXCLUSIVE

-27-

REMEDY, IS limited to the sole issue of whether such THE final board action resulted from unreasonable anticompetitive conduct. Failure to exhaust this administrative remedy before the committee shall preclude PRECLUDES the right of de novo review on the merits of the issue of unreasonable anticompetitive conduct.

- (8) Nothing in this article shall preclude PRECLUDES a physician or health care provider PERSON otherwise aggrieved by the final action of a governing board from seeking other remedies available to them by law, except as provided in subsection (7) of this section.
- (9) Review by The committee shall be CONDUCT THE REVIEW in accordance with the following procedures and, to the extent practicable, in accordance with the procedures used in the district courts of this state:
- (a) Review shall be initiated THE AGGRIEVED PERSON MUST INITIATE THE REVIEW by filing a verified complaint with the committee, no later than thirty days after receipt of a notice of final action by the governing board, alleging, with specificity, all facts disclosed in the record and all additional facts known to the complainant which THAT would support his OR HER allegation that the final action taken by the governing board resulted from unreasonable anticompetitive conduct.
- (b) The committee shall mail a copy of such THE complaint to the governing board and the professional review committee by certified mail, return receipt requested, within five days of AFTER the receipt of such THE complaint by the committee, advising them of their right to file a verified answer to the allegations stated therein Receipt of such complaint by mail shall make IN THE COMPLAINT. The recipients thereof OF THE COMPLAINT BECOME a party to these proceedings UPON RECEIPT OF THE COMPLAINT.
 - (e) If the committee finds THAT no such probable cause exists, it

-28-

shall dismiss the complaint, which dismissal shall constitute CONSTITUTES final administrative action.

- (f) If the committee finds such THAT probable cause exists, it shall schedule a hearing. At such THE hearing, the committee shall review the record below on the sole issue of whether the final action of the governing board resulted from unreasonable anticompetitive conduct and shall take evidence only with regard to the additional facts specifically alleged in the complaint or answer regarding unreasonable anticompetitive conduct, except when, in the discretion of the committee, the interests of a fair hearing demand otherwise.
- (k) If the committee finds by a preponderance of evidence that the final action of the governing board resulted from unreasonable anticompetitive conduct, it shall issue its final order disapproving and setting aside such THE action or modifying the action taken by the governing board in whole or in part, which final order shall be IS binding on the parties. THE COMMITTEE SHALL MAIL a copy of such THE order shall be mailed by certified mail, return receipt requested, to the parties.
- (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 OR NURSING BOARD, AS APPLICABLE, for such action as the board deems appropriate.
- (10) (a) Following final administrative action by the committee, such action of the committee may be reviewed only by the court of appeals MAYREVIEWTHEACTION OF THE COMMITTEE through appropriate proceedings brought pursuant to section 24-4-106 (11), C.R.S.
 - (b) Following final administrative action by the committee, any

-29-

A party aggrieved by the final action of a governing board who wishes to challenge the action of such THE governing board, rather than the committee's review of such THE action, shall have HAS the right to seek de novo review on the merits in a district court in Colorado. In no event shall the medical board, NURSING BOARD, or the committee be made parties to such a THE district court action.

- (c) As a condition of filing a complaint under paragraph (a) of subsection (9) of this section, the complainant shall post a cash bond or equivalent liquid security of three thousand dollars to cover anticipated costs which THAT may be assessed against him OR HER. Within thirty days of AFTER receipt of service of a complaint on a governing board, or concurrently with the filing of an answer, whichever is earlier, the governing board shall post a cash bond or equivalent liquid security of three thousand dollars to cover anticipated costs which THAT may be assessed against it as a party. The committee may enforce this latter requirement through the district court.
- (12) The committee shall promulgate such rules and regulations as may be necessary for the implementation of this section, including mechanisms to secure the payment of costs as provided in paragraph (c) of subsection (10) and subsection (11) of this section.
- (13) (a) Any A member of the committee, any A member of the committee's staff, any A person acting as a witness or consultant to the committee, any A witness testifying in a proceeding authorized under this article, and any A person who lodges a complaint pursuant to this article shall be immune from liability in any civil action brought against him or her for acts occurring while acting in his or her capacity as committee member, staff, consultant, or witness, respectively, if such individual was

-30-

1	acting in good faith within the scope of his or her respective capacity,
2	made a reasonable effort to obtain the facts of the matter as to which he
3	or she acted, and acted in the reasonable belief that the action taken by
4	him or her was warranted by the facts. Any person participating in good
5	faith in lodging a complaint or participating in any investigative or
6	administrative proceeding pursuant to this article shall be immune from
7	any civil or criminal liability that may result from such participation IS
8	IMMUNE FROM SUIT IN ANY CIVIL OR CRIMINAL ACTION, INCLUDING
9	ANTITRUST ACTIONS, AND IS IMMUNE FROM LIABILITY FOR DAMAGES
10	UNLESS, IN CONNECTION WITH THE PROFESSIONAL REVIEW PROCESS, THE
11	PERSON PROVIDED FALSE INFORMATION AND KNEW THAT THE
12	INFORMATION WAS FALSE.
13	(b) THE COMMITTEE IS IMMUNE FROM SUIT IN ANY CIVIL OR
14	CRIMINAL ACTION, INCLUDING ANTITRUST ACTIONS, AND IS IMMUNE FROM
15	LIABILITY FOR DAMAGES IF THE PROFESSIONAL REVIEW ACTION WAS
16	TAKEN WITHIN THE SCOPE OF THE PROFESSIONAL REVIEW PROCESS AND
17	WAS TAKEN:
18	(I) IN THE OBJECTIVELY REASONABLE BELIEF THAT THE ACTION
19	WAS IN THE FURTHERANCE OF QUALITY HEALTH CARE;
20	(II) AFTER AN OBJECTIVELY REASONABLE EFFORT TO OBTAIN THE
21	FACTS OF THE MATTER;
22	(III) IN THE OBJECTIVELY REASONABLE BELIEF THAT THE ACTION
23	TAKEN WAS WARRANTED BY THE FACTS; AND
24	(IV) IN ACCORDANCE WITH PROCEDURES THAT, UNDER THE
25	CIRCUMSTANCES, WERE FAIR TO THE PERSON LICENSED UNDER ARTICLE 36
26	OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND
27	GRANTED AUTHORITY AS AN ADVANCED PRACTICE NURSE.

-31-

1	SECTION 11. In Colorado Revised Statutes, amend 12-36.5-202
2	as follows:
3	12-36.5-202. Rules - compliance with reporting requirements
4	of federal act. Upon implementation of The Medical Board and
5	NURSING BOARD MAY PROMULGATE RULES TO COMPLY WITH THE
6	REPORTING REQUIREMENTS OF the federal "Health Care Quality
7	Improvement Act of 1986", as amended, 42 U.S.C. secs. 11101 through
8	11152, and upon implementation of MAY PARTICIPATE IN the federal data
9	bank. the medical board shall promulgate rules to comply with such act
10	which rules are consistent with the standards and the reporting
11	requirements of such act.
12	SECTION 12. In Colorado Revised Statutes, amend 12-36.5-203
13	as follows:
14	12-36.5-203. Limitations on liability relating to professional
15	review actions. (1) The following persons shall ARE IMMUNE FROM SUIT
16	AND not be liable for damages in any A civil OR CRIMINAL action with
17	respect to their participation in, assistance to, or reporting of information
18	to a professional review body COMMITTEE in connection with a
19	professional review action in this state, and such THE persons shall ARE
20	IMMUNE FROM SUIT AND not be liable for damages in any A civil action
21	with respect to their participation in, assistance to, or reporting of
22	information to a professional review body which COMMITTEE THAT meets
23	the standards of and is in conformity with the provisions of the federal
24	"Health Care Quality Improvement Act of 1986", as amended, 42 U.S.C.
25	secs. 11101 through 11152: upon implementation of such act by the
26	federal government:
27	(a) The AN AUTHORIZED ENTITY, professional review body

-32-

1	COMMITTEE, OR GOVERNING BOARD;
2	(b) Any person acting as a member of or staff to the AUTHORIZED
3	ENTITY, professional review body COMMITTEE, OR GOVERNING BOARD;

- (c) Any person under a contract or other formal agreement with the professional review body A witness, consultant, or other person who provided information to the authorized entity, professional
- 7 REVIEW COMMITTEE, OR GOVERNING BOARD; AND
 - (d) Any person who participates with or assists the professional review body COMMITTEE OR GOVERNING BOARD with respect to the professional review action ACTIVITIES.
 - (2) Notwithstanding any other provision of law, no person, whether as a witness or otherwise, who provides information to a professional review body regarding the competence or professional conduct of a physician shall be held, by reason of having provided such information, liable in damages in any civil action unless such information is false and the person providing it knew that such information was false.
 - (3) For the purposes of this section, unless the context otherwise requires:
 - (a) "Professional review action" means an action or recommendation of a professional review body which COMMITTEE THAT is taken or made in the conduct of professional review activity and which THAT is based on the QUALITY AND APPROPRIATENESS OF PATIENT CARE PROVIDED BY, AND THE QUALIFICATIONS, competence, or professional conduct of, an individual physician PERSON LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AN AUTHORITY AS AN ADVANCED PRACTICE NURSE, which conduct ACTION affects or may affect adversely the PERSON'S clinical

-33-

1	privileges of or membership in a professional society of the physician AN
2	AUTHORIZED ENTITY. "Professional review action" includes a formal
3	decision by the professional review body COMMITTEE not to take an action
4	or make a recommendation as provided in this paragraph (a) and also
5	includes professional review activities relating to a professional review
6	action. An action shall Is not be considered to be based upon the
7	competence or professional conduct of a physician PERSON if the action
8	is primarily based on:
9	(I) The physician's PERSON'S association or lack of association
10	with a professional society or association;
11	(II) The physician's PERSON'S fees or his OR HER advertising or
12	engaging in other competitive acts intended to solicit or retain business;
13	(III) The physician's PERSON'S association with, supervision of,
14	delegation of authority to, support for, training of, or participation in a
15	private group practice with a member or members of a particular class of
16	health care practitioners or professionals;
17	(IV) The physician's PERSON'S participation in prepaid group
18	health plans, salaried employment, or any other manner of delivering
19	health services whether on a fee-for-service basis or other basis;
20	(V) Any other matter that does not relate to the QUALITY AND
21	APPROPRIATENESS OF PATIENT CARE PROVIDED BY, OR THE
22	QUALIFICATIONS, competence, or professional conduct of, a physician
23	PERSON LICENSED UNDER ARTICLE $\overline{36}$ OF THIS TITLE OR LICENSED UNDER
24	ARTICLE 38 OF THIS TITLE AND GRANTED AN AUTHORITY AS AN ADVANCED
25	PRACTICE NURSE.
26	(b) "Professional review body" means a health care entity and the
27	governing body or any committee of a health care entity which conducts

-34-

1	professional review actions and includes any committee of the medical
2	staff of such an entity when assisting the governing body in a professional
3	review activity.
4	SECTION 13. In Colorado Revised Statutes, 12-36-118, amend
5	(10) (b) as follows:
6	12-36-118. Disciplinary action by board - immunity - rules.
7	(10) (b) For purposes of the records related to a complaint filed pursuant
8	to this section against a licensee, the board shall be considered IS a
9	professional review committee, the records related to the complaint shall
10	include all records described in section 12-36.5-102 (4) (7), and section
11	12-36.5-104 (10) shall apply (11) APPLIES to those records.
12	SECTION 14. Effective date. (1) Except as otherwise provided
13	in subsection (2) of this section, this act takes effect July 1, 2012.
14	(2) Section 11 of this act takes effect only if House Bill 12-1297
15	does not become law.
16	SECTION 15. Safety clause. The general assembly hereby finds,
17	determines, and declares that this act is necessary for the immediate
18	preservation of the public peace, health, and safety.

-35- 1300