

Second Regular Session
Sixty-seventh General Assembly
STATE OF COLORADO

INTRODUCED

LLS NO. 10-0328.02 Christy Chase

HOUSE BILL 10-1260

HOUSE SPONSORSHIP

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House Committees

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A BILL FOR AN ACT

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

Bill Summary

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

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.

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

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

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

Sections 6 through 12 of the bill:

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

Section 13 of the bill:

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

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

procedures and duties of the medical board.

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

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

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

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

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

Section 23 of the bill:

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

license; and

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

1 department of regulatory agencies:

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

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

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

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

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

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

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

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

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

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

27 (f) THE FUNCTIONS OF PROFESSIONAL REVIEW COMMITTEES

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

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

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

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

8 (3.3) "BEMTS" MEANS THE BOARD OF EMERGENCY MEDICAL AND
9 TRAUMA SERVICES CREATED PURSUANT TO SECTION 25-3.5-202.5.

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

12 **25-3.5-201. Training programs.** (1) The department shall
13 design and establish specialized curricula for personnel who respond
14 routinely to emergencies. PRIOR TO JANUARY 1, 2011, each curriculum
15 shall be approved by the council in consultation with the ~~state~~ COLORADO
16 MEDICAL board. ~~of medical examiners~~ ON AND AFTER JANUARY 1, 2011,
17 THE COUNCIL SHALL CONSULT WITH THE BEMTS WHEN REVIEWING
18 CURRICULA FOR APPROVAL PURSUANT TO THIS SECTION. The board of
19 county commissioners may select from the various curricula available
20 those courses meeting the minimum requirements established by said
21 board.

22 **SECTION 8.** Part 2 of article 3.5 of title 25, Colorado Revised
23 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
24 read:

25 **25-3.5-202.5. BEMTS created - repeal.** (1) THERE IS HEREBY
26 CREATED WITHIN THE DEPARTMENT THE BOARD OF EMERGENCY MEDICAL
27 AND TRAUMA SERVICES, REFERRED TO IN THIS ARTICLE AS THE "BEMTS".

1 STARTING JANUARY 1, 2011, THE BEMTS SHALL BE RESPONSIBLE FOR
2 REGULATING EMERGENCY MEDICAL TECHNICIANS PURSUANT TO THIS
3 ARTICLE AND RULES ADOPTED BY THE BEMTS.

4 (2) (a) THE BEMTS SHALL CONSIST OF NINE MEMBERS APPOINTED
5 BY THE GOVERNOR AS FOLLOWS:

6 (I) FOUR MEMBERS WHO ARE LICENSED PHYSICIANS ACTIVE IN
7 EMERGENCY MEDICAL SERVICES MEDICAL DIRECTION;

8 (II) FOUR MEMBERS WHO ARE LICENSED OR CERTIFIED HEALTH
9 CARE PROFESSIONALS ACTIVE IN EMERGENCY MEDICAL SERVICES; AND

10 (III) ONE MEMBER FROM THE PUBLIC AT LARGE.

11 (b) (I) EXCEPT AS PROVIDED IN SUBPARAGRAPH (II) OF THIS
12 PARAGRAPH (b), THE MEMBERS OF THE BEMTS SHALL SERVE FOUR-YEAR
13 TERMS OF OFFICE AND SHALL SERVE NO MORE THAN TWO CONSECUTIVE
14 TERMS. A VACANCY ON THE BEMTS SHALL BE FILLED BY APPOINTMENT
15 BY THE GOVERNOR FOR THE REMAINDER OF THE UNEXPIRED TERM.

16 (II) TO ENSURE STAGGERED TERMS OF OFFICE, THE INITIAL
17 APPOINTEES TO THE BOARD SHALL SERVE THE FOLLOWING TERMS OF
18 OFFICE:

19 (A) TWO OF THE LICENSED PHYSICIAN MEMBERS AND ONE OF THE
20 LICENSED OR CERTIFIED HEALTH CARE PROFESSIONALS SHALL SERVE AN
21 INITIAL FOUR-YEAR TERM OF OFFICE;

22 (B) ONE OF THE LICENSED PHYSICIAN MEMBERS AND TWO OF THE
23 LICENSED OR CERTIFIED HEALTH CARE PROFESSIONALS SHALL SERVE AN
24 INITIAL THREE-YEAR TERM OF OFFICE; AND

25 (C) ONE OF THE LICENSED PHYSICIAN MEMBERS, ONE OF THE
26 LICENSED OR CERTIFIED HEALTH CARE PROFESSIONALS, AND THE PUBLIC
27 MEMBER SHALL SERVE AN INITIAL TWO-YEAR TERM OF OFFICE.

1 (c) THE BEMTS SHALL MEET AT LEAST ANNUALLY AT THE CALL
2 OF THE CHAIR. AT THE FIRST MEETING AFTER THE APPOINTMENT OF NEW
3 MEMBERS, AND ANNUALLY THEREAFTER, THE MEMBERS OF THE BEMTS
4 SHALL SELECT A CHAIR TO SERVE FOR A ONE-YEAR TERM.

5 (3) THE BEMTS SHALL ADOPT RULES IN ACCORDANCE WITH
6 SECTION 25-3.5-203 (1) (a.5) REGARDING THE REGULATION OF
7 EMERGENCY MEDICAL TECHNICIANS.

8 (4) (a) THE BEMTS AND ITS FUNCTIONS ARE REPEALED, EFFECTIVE
9 JULY 1, 2017.

10 (b) PRIOR TO SUCH REPEAL, THE BEMTS AND ITS FUNCTIONS
11 SHALL BE REVIEWED IN ACCORDANCE WITH SECTION 24-34-104, C.R.S.

12 **SECTION 9.** 25-3.5-203 (1) (a), Colorado Revised Statutes, is
13 amended, and the said 25-3.5-203 (1) is further amended BY THE
14 ADDITION OF A NEW PARAGRAPH, to read:

15 **25-3.5-203. Emergency medical technicians - certification -**
16 **renewal of certificate - duties of department - rules adopted by the**
17 **BEMTS - criminal history record checks - repeal.** (1) (a) (I) PRIOR TO
18 JANUARY 1, 2011, the duties and functions of emergency medical
19 technicians, including the acts that they are authorized to perform subject
20 to the medical direction of a licensed physician, shall be regulated by
21 rules adopted by the Colorado ~~state~~ MEDICAL board. ~~of medical~~
22 ~~examiners.~~ The council shall advise and make recommendations to said
23 board concerning such rules before final adoption.

24 (II) THIS PARAGRAPH (a) IS REPEALED, EFFECTIVE JANUARY 1,
25 2011.

26 (a.5) ON AND AFTER JANUARY 1, 2011, THE BEMTS SHALL
27 REGULATE THE DUTIES AND FUNCTIONS OF EMERGENCY MEDICAL

1 TECHNICIANS, INCLUDING THE ACTS EMERGENCY MEDICAL TECHNICIANS
2 ARE AUTHORIZED TO PERFORM SUBJECT TO THE MEDICAL DIRECTION OF A
3 LICENSED PHYSICIAN. THE BEMTS, AFTER CONSIDERING THE ADVICE AND
4 RECOMMENDATIONS OF THE COUNCIL, SHALL ADOPT RULES REGARDING
5 THE REGULATION OF EMERGENCY MEDICAL TECHNICIANS AND THEIR
6 DUTIES AND FUNCTIONS.

7 **SECTION 10.** 25-3.5-205 (5) (a), Colorado Revised Statutes, is
8 amended to read:

9 **25-3.5-205. Emergency medical technicians - investigations -**
10 **discipline.** (5) For the purposes of this section:

11 (a) "Medical director" means a physician who supervises certified
12 emergency medical technicians consistent with the rules adopted by the
13 ~~board of medical examiners~~ PURSUANT TO SECTION 25-3.5-203 (1).

14 **SECTION 11.** 12-36-106 (3), Colorado Revised Statutes, is
15 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

16 **12-36-106. Practice of medicine defined - exemptions from**
17 **licensing requirements - unauthorized practice by physician**
18 **assistants - penalties - repeal.** (3) Nothing in this section shall be
19 construed to prohibit, or to require a license or a physician training license
20 under this article with respect to, any of the following acts:

21 (w) THE RENDERING OF SERVICES BY AN EMERGENCY MEDICAL
22 TECHNICIAN CERTIFIED PURSUANT TO SECTION 25-3.5-203, C.R.S., AS
23 LONG AS THE SERVICES RENDERED ARE CONSISTENT WITH RULES ADOPTED
24 BY THE BOARD OF EMERGENCY MEDICAL AND TRAUMA SERVICES
25 PURSUANT TO SECTION 25-3.5-203 (1) (a.5), C.R.S., DEFINING THE DUTIES
26 AND FUNCTIONS OF EMERGENCY MEDICAL TECHNICIANS.

27 **SECTION 12.** 24-34-104 (48), Colorado Revised Statutes, is

1 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

2 **24-34-104. General assembly review of regulatory agencies**
3 **and functions for termination, continuation, or reestablishment.**

4 (48) The following agencies, functions, or both, shall terminate on July
5 1, 2017:

6 (i) THE BOARD OF EMERGENCY MEDICAL AND TRAUMA SERVICES
7 CREATED IN SECTION 25-3.5-202.5, C.R.S.

8 **SECTION 13.** 12-36-103 (1) (a), (2), (3), (4), (6) (a), and (7),
9 Colorado Revised Statutes, are amended to read:

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

16 (A) ELEVEN physician members; and

17 (B) ~~four~~ FIVE members from the public at large who have no
18 financial or professional association with the medical profession. ~~to be~~
19 ~~appointed by the governor and to have the qualifications provided in this~~
20 ~~article.~~

21 (II) The terms of the members of the board shall be four years.
22 ~~For the two public member appointees added to the board during the~~
23 ~~calendar year beginning January 1, 2000, the term for one public member~~
24 ~~appointee shall expire May 3, 2002, and the other shall expire May 3,~~
25 ~~2003~~ FOR THE TWO PHYSICIAN AND ONE PUBLIC MEMBER APPOINTEES
26 ADDED TO THE BOARD DURING THE CALENDAR YEAR BEGINNING JANUARY
27 1, 2010, THE TERM FOR ONE OF THE PHYSICIAN MEMBER APPOINTEES

1 SHALL EXPIRE FOUR YEARS AFTER THE APPOINTMENT; THE TERM FOR THE
2 OTHER PHYSICIAN MEMBER APPOINTEE SHALL EXPIRE THREE YEARS AFTER
3 THE APPOINTMENT; AND THE TERM FOR THE PUBLIC MEMBER APPOINTEE
4 SHALL EXPIRE TWO YEARS AFTER THE APPOINTMENT. Thereafter, the
5 terms of the members of the board shall be four years.

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

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

1 OF OSTEOPATHY, THE GOVERNOR MAY APPOINT A PHYSICIAN WHO HAS THE
2 DEGREE OF DOCTOR OF MEDICINE AND WHOSE LICENSE IS IN GOOD
3 STANDING TO FILL THE VACANCY FOR ONE TERM.

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

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

26 (6) (a) The provisions of section 24-34-104, C.R.S., concerning
27 the termination schedule for regulatory bodies of the state unless extended

1 as provided in that section, are applicable to the Colorado ~~state~~ MEDICAL
2 board of ~~medical examiners~~ created by this section.

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

9 **SECTION 14.** Part 1 of article 36 of title 12, Colorado Revised
10 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
11 read:

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

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

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

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

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

26 (c) IF THE PRESIDENT DETERMINES THAT THE BOARD LACKS A
27 MEMBER TO SERVE ON THE LICENSING PANEL THAT MEETS THE CRITERIA

1 SPECIFIED IN PARAGRAPH (a) OF THIS SUBSECTION (1), THE PRESIDENT MAY
2 APPOINT ANOTHER BOARD MEMBER TO FILL THE VACANCY ON THE PANEL.

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

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

25 **SECTION 15.** 12-36-104 (1) (c), (1) (e), and (3), Colorado
26 Revised Statutes, are amended to read:

27 **12-36-104. Powers and duties of board.** (1) In addition to all

1 other powers and duties conferred and imposed upon the board by this
2 article, the board has the following powers and duties to:

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

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

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

20 **SECTION 16.** 12-36-118 (5) (f), (7), (10), (13), and (14) (a),
21 Colorado Revised Statutes, are amended to read:

22 **12-36-118. Disciplinary action by board - immunity.**

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

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

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

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

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

1 RELATED TO THE COMPLAINT SHALL INCLUDE ALL RECORDS DESCRIBED IN
2 SECTION 12-36.5-102 (4), AND SECTION 12-36.5-104 (10) SHALL APPLY TO
3 THOSE RECORDS.

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

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

1 **SECTION 17.** 12-36-106.4 (4) (b), Colorado Revised Statutes,
2 is amended to read:

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

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

27 (III) IF, AFTER THE DIRECTOR ADOPTS RULES PURSUANT TO THIS

1 PARAGRAPH (b), THE COLORADO MEDICAL BOARD AND THE STATE BOARD
2 OF NURSING ADOPT RULES THAT ARE COMPLEMENTARY, THE DIRECTOR
3 SHALL AMEND OR REPEAL HIS OR HER RULES AS APPROPRIATE TO AVOID
4 CONFLICT WITH THE RULES OF THE RESPECTIVE BOARDS.

5 **SECTION 18.** 12-38-111.6 (4.5) (f), Colorado Revised Statutes,
6 is amended to read:

7 **12-38-111.6. Prescriptive authority - advanced practice nurses**
8 **- rules - repeal.** (4.5) (f) (I) Except as provided in subparagraph (II) of
9 this paragraph (f), the board shall adopt rules to implement this subsection
10 (4.5), which rules shall take effect on July 1, 2010. The board shall
11 consider the recommendations of the nurse-physician advisory task force
12 for Colorado health care submitted in accordance with section 24-34-109,
13 C.R.S., concerning prescriptive authority of advanced practice nurses.
14 The rules shall be complementary to rules adopted by the ~~state~~ COLORADO
15 MEDICAL board of ~~medical examiners~~ pursuant to section 12-36-106.4.

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

26 (B) IF THE DIRECTOR DETERMINES THAT THE TWO BOARDS HAVE
27 ADOPTED COMPLEMENTARY RULES REGARDING THE PRESCRIPTIVE

1 AUTHORITY OF ADVANCED PRACTICE NURSES AND COLLABORATION
2 BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS, THE DIRECTOR
3 SHALL NOT ADOPT RULES THAT SUPERSEDE AND REPLACE THE RULES OF
4 THE TWO BOARDS, BUT THE DIRECTOR SHALL REVIEW ANY AMENDMENTS
5 TO THOSE RULES BY EITHER BOARD TO ENSURE THAT THE RULES REMAIN
6 COMPLEMENTARY. IF THE DIRECTOR DETERMINES THAT AN AMENDMENT
7 TO THE RULES BY THE STATE BOARD OF NURSING OR THE COLORADO
8 MEDICAL BOARD RESULTS IN RULES ON PRESCRIPTIVE AUTHORITY AND
9 COLLABORATION THAT ARE NO LONGER COMPLEMENTARY, THE DIRECTOR
10 SHALL ADOPT RULES THAT SUPERSEDE AND REPLACE THE RULES OF THE
11 TWO BOARDS.

12 (C) IF, AFTER THE DIRECTOR ADOPTS RULES PURSUANT TO THIS
13 SUBPARAGRAPH (II), THE STATE BOARD OF NURSING AND THE COLORADO
14 MEDICAL BOARD ADOPT RULES THAT ARE COMPLEMENTARY, THE
15 DIRECTOR SHALL AMEND OR REPEAL HIS OR HER RULES AS APPROPRIATE
16 TO AVOID CONFLICT WITH THE RULES OF THE RESPECTIVE BOARDS.

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

20 **12-36-114.3. Pro bono license - qualifications - reduced fee -**
21 **rules.** (1) NOTWITHSTANDING ANY OTHER PROVISION OF THIS ARTICLE,
22 THE BOARD MAY ISSUE A PRO BONO LICENSE TO A PHYSICIAN TO PRACTICE
23 MEDICINE IN THIS STATE FOR NOT MORE THAN SIXTY DAYS IN A CALENDAR
24 YEAR IF THE PHYSICIAN:

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

1 (II) HAS BEEN ON INACTIVE STATUS PURSUANT TO SECTION
2 12-36-137 FOR NOT MORE THAN TWO YEARS; OR

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

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

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

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

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

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

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

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

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

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

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

27 (5) A PHYSICIAN GRANTED A PRO BONO LICENSE UNDER THIS

1 SECTION IS SUBJECT TO DISCIPLINE BY THE BOARD FOR COMMITTING
2 UNPROFESSIONAL CONDUCT, AS DEFINED IN SECTION 12-36-117, OR ANY
3 OTHER ACT PROHIBITED BY THIS ARTICLE.

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

6 **SECTION 20. Repeal.** 12-36-107 (5), Colorado Revised
7 Statutes, is repealed.

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

11 **12-36-114.5. Reentry license.** (1) NOTWITHSTANDING ANY
12 OTHER PROVISION OF THIS ARTICLE, THE BOARD MAY ISSUE A REENTRY
13 LICENSE TO A PHYSICIAN OR PHYSICIAN ASSISTANT WHO HAS NOT
14 ACTIVELY PRACTICED MEDICINE OR PRACTICED AS A PHYSICIAN
15 ASSISTANT, AS APPLICABLE, FOR THE TWO-YEAR PERIOD IMMEDIATELY
16 PRECEDING THE FILING OF AN APPLICATION FOR A REENTRY LICENSE, OR
17 WHO HAS NOT OTHERWISE MAINTAINED CONTINUED COMPETENCY DURING
18 SUCH PERIOD, AS DETERMINED BY THE BOARD. THE BOARD MAY CHARGE
19 A FEE FOR A REENTRY LICENSE.

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

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

27 (II) DEVELOP AN EDUCATIONAL PROGRAM SPECIFIC TO THE

1 APPLICANT; AND

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

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

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

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

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

23 **SECTION 22.** 12-36-123.5 (3.5) (b) and (3.5) (e) (I), Colorado
24 Revised Statutes, are amended, and the said 12-36-123.5 (3.5) is further
25 amended BY THE ADDITION OF A NEW PARAGRAPH, to read:

26 **12-36-123.5. Physicians' and physician assistants' peer health**
27 **assistance program.** (3.5) (b) (I) ~~Effective January 1, 1999,~~ As a

1 condition of PHYSICIAN AND PHYSICIAN ASSISTANT licensure AND
2 RENEWAL in this state, ~~and effective January 1, 1999, as a condition of~~
3 ~~physician assistant certification~~ every renewal applicant shall pay, to the
4 ~~administering entity that has been selected by the board~~ pursuant to the
5 ~~provisions of~~ paragraphs (d) and (e) of this subsection (3.5), an amount
6 set by the board not to exceed ~~fifty~~ SIXTY-ONE dollars per year, which
7 maximum amount may be adjusted on January 1, ~~2000~~ 2011, and annually
8 thereafter by the board to reflect:

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

13 (B) OVERALL UTILIZATION OF THE PROGRAM; AND

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

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

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

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

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

1 (g) THE BOARD MAY COLLECT THE REQUIRED ANNUAL PAYMENTS
2 FOR THE BENEFIT OF THE ADMINISTERING ENTITY AND SHALL TRANSFER
3 SUCH PAYMENTS TO THE ADMINISTERING ENTITY. ALL PAYMENTS
4 COLLECTED BY THE BOARD ARE CUSTODIAL FUNDS THAT ARE NOT SUBJECT
5 TO APPROPRIATION BY THE GENERAL ASSEMBLY, AND THE DISTRIBUTION
6 OF PAYMENTS TO THE ADMINISTERING ENTITY DOES NOT CONSTITUTE
7 STATE FISCAL YEAR SPENDING FOR PURPOSES OF SECTION 20 OF ARTICLE
8 X OF THE STATE CONSTITUTION.

9 **SECTION 23.** 12-36-106 (1) (b), (1) (g), and (2), the introductory
10 portion to 12-36-106 (3), and 12-36-106 (3) (b) and (5) (b) (I), Colorado
11 Revised Statutes, are amended to read:

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

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

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

24 Nothing in this paragraph (g) ~~shall be construed to authorize~~ AUTHORIZES
25 physicians to deliver services outside their scope of practice ~~nor to limit~~
26 OR LIMITS the delivery of health services by other licensed professionals,
27 within the professional's scope of practice, using advanced technology,

1 including, but not limited to, interactive audio, interactive video, or
2 interactive data communication.

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

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

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

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

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

26 (III) Is NOT party to any contract, agreement, or understanding to
27 provide ~~the services described in paragraph (a) of subsection (1) of this~~

1 ~~section or if such physician maintains or is provided with for his or her~~
2 ~~regular use any~~ IN THIS STATE ON A REGULAR OR ROUTINE BASIS;

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

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

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

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

23 **SECTION 24.** The introductory portion to 12-36-107 (1) and
24 12-36-107 (1) (b), (1) (d), (2) (b), and (2) (c), Colorado Revised Statutes,
25 are amended, and the said 12-36-107 (1) is further amended BY THE
26 ADDITION OF A NEW PARAGRAPH, to read:

27 **12-36-107. Qualifications for licensure.** (1) Subject to the other

1 conditions and provisions of this article, a license to practice medicine
2 shall be granted by the board to an applicant ~~therefor~~ only upon the basis
3 of:

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

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

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

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

27 (III) ~~The medical school from which the applicant graduated was~~

1 ~~approved by this or such prior board at the time of the issuance of such~~
2 ~~license or certificate.~~

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

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

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

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

16 (D) SUBMITS PROOF SATISFACTORY TO THE BOARD THAT HE OR
17 SHE HAS NOT BEEN AND IS NOT SUBJECT TO FINAL OR PENDING
18 DISCIPLINARY OR OTHER ACTION BY ANY STATE OR JURISDICTION IN WHICH
19 THE APPLICANT IS OR HAS BEEN PREVIOUSLY LICENSED; EXCEPT THAT, IF
20 THE APPLICANT IS OR HAS BEEN SUBJECT TO SUCH ACTION, THE BOARD
21 MAY REVIEW THE ACTION TO DETERMINE WHETHER THE UNDERLYING
22 CONDUCT WARRANTS REFUSAL OF A LICENSE PURSUANT TO SECTION
23 12-36-116.

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

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

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

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

8 **SECTION 25.** 12-36-118 (5), Colorado Revised Statutes, is
9 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

10 **12-36-118. Disciplinary action by board - immunity.**

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

19 **SECTION 26.** 12-36-117 (1) (o), Colorado Revised Statutes, is
20 amended to read:

21 **12-36-117. Unprofessional conduct - repeal.**

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

23 (o) ~~Such~~ FAILING TO NOTIFY THE BOARD, AS REQUIRED BY SECTION
24 12-36-118.5 (1), OF A PHYSICAL OR MENTAL ILLNESS OR CONDITION THAT
25 IMPACTS THE LICENSEE'S ABILITY TO PERFORM A MEDICAL SERVICE WITH
26 REASONABLE SKILL AND WITH SAFETY TO PATIENTS, FAILING TO ACT
27 WITHIN THE LIMITATIONS CREATED BY A physical or mental ~~disability~~ as

1 ~~to render~~ ILLNESS OR CONDITION THAT RENDERS the licensee unable to
2 perform A medical ~~services~~ SERVICE with reasonable skill and with safety
3 to the patient, OR FAILING TO COMPLY WITH THE LIMITATIONS AGREED TO
4 UNDER A CONFIDENTIAL AGREEMENT ENTERED PURSUANT TO SECTION
5 12-36-118.5;

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

9 **12-36-118.5. Confidential agreements to limit practice -**
10 **violation grounds for discipline.** (1) IF A PHYSICIAN OR PHYSICIAN
11 ASSISTANT SUFFERS FROM A PHYSICAL OR MENTAL ILLNESS OR CONDITION
12 THAT RENDERS THE LICENSEE UNABLE TO PRACTICE MEDICINE OR
13 PRACTICE AS A PHYSICIAN ASSISTANT WITH REASONABLE SKILL AND WITH
14 SAFETY TO PATIENTS, THE PHYSICIAN OR PHYSICIAN ASSISTANT SHALL
15 NOTIFY THE BOARD OF THE ILLNESS OR CONDITION IN A MANNER AND
16 WITHIN A PERIOD DETERMINED BY THE BOARD. THE BOARD MAY REQUIRE
17 THE LICENSEE TO SUBMIT TO AN EXAMINATION OR REFER THE LICENSEE TO
18 A PEER HEALTH ASSISTANCE PROGRAM PURSUANT TO SECTION 12-36-123.5
19 TO EVALUATE AND DETERMINE THE EXTENT OF THE ILLNESS OR CONDITION
20 AND ITS IMPACT ON THE LICENSEE'S ABILITY TO PRACTICE WITH
21 REASONABLE SKILL AND WITH SAFETY TO PATIENTS.

22 (2) (a) UPON DETERMINING THAT A PHYSICIAN OR PHYSICIAN
23 ASSISTANT WITH A PHYSICAL OR MENTAL ILLNESS OR CONDITION IS ABLE
24 TO RENDER LIMITED MEDICAL SERVICES WITH REASONABLE SKILL AND
25 WITH SAFETY TO PATIENTS, THE BOARD MAY ENTER INTO A CONFIDENTIAL
26 AGREEMENT WITH THE PHYSICIAN OR PHYSICIAN ASSISTANT IN WHICH THE
27 PHYSICIAN OR PHYSICIAN ASSISTANT AGREES TO LIMIT HIS OR HER

1 PRACTICE BASED ON THE RESTRICTIONS IMPOSED BY THE ILLNESS OR
2 CONDITION, AS DETERMINED BY THE BOARD AND CONSISTENT WITH ANY
3 RECOMMENDATIONS PROVIDED BY A PEER HEALTH ASSISTANCE PROGRAM.

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

9 (c) THE BOARD MAY MODIFY THE AGREEMENT AS NECESSARY
10 BASED ON THE RESULTS OF A REEVALUATION OR OF MONITORING. IF THE
11 BOARD DETERMINES, BASED ON THE MONITORING OR REEVALUATION,
12 THAT THE LICENSEE IS NO LONGER SUFFERING FROM A PHYSICAL OR
13 MENTAL ILLNESS OR CONDITION THAT LIMITS HIS OR HER ABILITY TO
14 PRACTICE WITH REASONABLE SKILL AND WITH SAFETY TO PATIENTS, OR
15 THAT THE PHYSICAL OR MENTAL ILLNESS OR CONDITION NO LONGER
16 IMPACTS THE LICENSEE'S ABILITY TO PRACTICE, THE BOARD MAY DISSOLVE
17 THE AGREEMENT AND ALLOW THE LICENSEE TO ENGAGE IN UNRESTRICTED
18 PRACTICE UNDER HIS OR HER LICENSE.

19 (3) BY ENTERING INTO AN AGREEMENT WITH THE BOARD
20 PURSUANT TO THIS SECTION TO LIMIT HIS OR HER PRACTICE, THE LICENSEE
21 SHALL NOT BE DEEMED TO BE ENGAGING IN UNPROFESSIONAL CONDUCT,
22 AND THE AGREEMENT SHALL BE CONSIDERED AN ADMINISTRATIVE ACTION
23 AND SHALL NOT CONSTITUTE A RESTRICTION OR DISCIPLINE BY THE BOARD.
24 HOWEVER, IF THE LICENSEE FAILS TO COMPLY WITH THE TERMS OF AN
25 AGREEMENT ENTERED INTO PURSUANT TO THIS SECTION, SUCH FAILURE
26 CONSTITUTES UNPROFESSIONAL CONDUCT PURSUANT TO SECTION
27 12-36-117 (1) (o), AND THE LICENSEE SHALL BE SUBJECT TO DISCIPLINE IN

1 ACCORDANCE WITH SECTION 12-36-118.

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

4 **SECTION 28.** 12-36-117 (1) (i), (1) (y), (1) (z), and (1) (bb) (II),
5 Colorado Revised Statutes, are amended to read:

6 **12-36-117. Unprofessional conduct - repeal.**

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

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

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

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

26 (bb) (II) In determining which activities and practices are not
27 consistent with the standard of care or are contrary to recognized

1 standards of the practice of medicine, the board of ~~medical examiners~~
2 shall utilize, in addition to its own expertise, the standards developed by
3 recognized and established accreditation or review organizations ~~which~~
4 ~~organizations~~ THAT meet requirements established by the board by rule.
5 ~~and regulation.~~ Such determinations shall include but not be limited to
6 appropriate ordering of laboratory tests and studies, appropriate ordering
7 of diagnostic tests and studies, appropriate treatment of the medical
8 condition under review, appropriate use of consultations or referrals in
9 patient care, and appropriate creation and maintenance of patient records.

10 **SECTION 29.** The introductory portion to 12-36-118 (5) (g) (III),
11 Colorado Revised Statutes, is amended to read:

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

13 (5) (g) (III) If the hearings panel finds the charges proven and orders that
14 discipline be imposed, it shall also determine the extent of such
15 discipline, which shall be in the form of a letter of admonition,
16 suspension for a definite or indefinite period, or revocation of license to
17 practice. ~~In lieu of a suspension,~~ The hearings panel ALSO may impose
18 a fine ~~not to exceed ten~~ OF UP TO FIVE thousand dollars PER VIOLATION.

19 In determining appropriate disciplinary action, the hearings panel shall
20 first consider sanctions that are necessary to protect the public. Only after
21 the panel has considered such sanctions may it consider and order
22 requirements designed to rehabilitate the licensee or applicant. If
23 discipline other than revocation of a license to practice is imposed, the
24 hearings panel may also order that the licensee be granted probation and
25 allowed to continue to practice during the period of such probation. The
26 hearings panel may also include in any disciplinary order that allows the
27 licensee to continue to practice such conditions as the panel may deem

1 appropriate to assure that the licensee is physically, mentally, morally,
2 and otherwise qualified to practice medicine or practice as a physician
3 assistant in accordance with generally accepted professional standards of
4 practice, including any or all of the following:

5 **SECTION 30.** The introductory portion to 13-64-301 (1) and
6 13-64-301 (1) (a), (1) (c), and (3), Colorado Revised Statutes, are
7 amended, and the said 13-64-301 (1) is further amended BY THE
8 ADDITION OF A NEW PARAGRAPH, to read:

9 **13-64-301. Financial responsibility.** (1) AS A CONDITION OF
10 ACTIVE LICENSURE OR AUTHORITY TO PRACTICE IN THIS STATE, every
11 physician or dentist, and every health care institution as defined in section
12 13-64-202, except as provided in section 13-64-303.5, ~~which provide~~
13 THAT PROVIDES health care services shall establish financial
14 responsibility, as follows:

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

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

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

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

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

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

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

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

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

27 (II) THE COLORADO MEDICAL BOARD MAY, BY RULE, EXEMPT

1 FROM OR ESTABLISH LESSER FINANCIAL RESPONSIBILITY STANDARDS THAN
2 THOSE PRESCRIBED IN THIS PARAGRAPH (a.5) FOR CLASSES OF PHYSICIANS
3 WHO:

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

6 (B) RENDER LIMITED OR OCCASIONAL MEDICAL SERVICES;

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

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

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

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

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

25 (3) Notwithstanding the minimum amount specified in paragraph
26 ~~(a)~~ (a.5) of subsection (1) of this section, if THE COLORADO MEDICAL
27 BOARD RECEIVES two or more reports ~~are received by the board of~~

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

13 **SECTION 31.** Part 1 of article 36 of title 12, Colorado Revised
14 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
15 read:

16 **12-36-140. Protection of medical records - licensee's**
17 **obligations - verification of compliance - noncompliance grounds for**
18 **discipline - rules.** (1) EACH LICENSED PHYSICIAN AND PHYSICIAN
19 ASSISTANT SHALL DEVELOP A WRITTEN PLAN TO ENSURE THE SECURITY OF
20 PATIENT MEDICAL RECORDS. THE PLAN SHALL ADDRESS AT LEAST THE
21 FOLLOWING:

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

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

27 (c) THE METHOD BY WHICH PATIENTS MAY ACCESS OR OBTAIN

1 THEIR MEDICAL RECORDS PROMPTLY IF ANY OF THE EVENTS DESCRIBED IN
2 PARAGRAPH (b) OF THIS SUBSECTION (1) OCCURS.

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

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

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

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

15 **SECTION 32.** 12-36-106 (5) (a), (5) (c), (5) (d), (5) (e), (5) (f),
16 (5) (g), (5) (i), (5) (j), and (5) (k), Colorado Revised Statutes, are
17 amended to read:

18 **12-36-106. Practice of medicine defined - exemptions from**
19 **licensing requirements - unauthorized practice by physician**
20 **assistants - penalties - repeal.** (5) (a) A person licensed under the laws
21 of this state to practice medicine may delegate to a physician assistant
22 licensed by the board PURSUANT TO SECTION 12-36-107.3 the authority to
23 perform acts that constitute the practice of medicine to the extent and in
24 the manner authorized by rules ~~and regulations~~ promulgated by the board,
25 including the authority to prescribe medication, including controlled
26 substances, and dispense only such drugs as designated by the board.
27 Such acts shall be consistent with sound medical practice. Each

1 prescription issued by a physician assistant licensed by the board shall
2 ~~have~~ BE imprinted ~~thereon~~ WITH the name of his or her supervising
3 physician. Nothing in this subsection (5) shall limit the ability of
4 otherwise licensed health personnel to perform delegated acts. The
5 dispensing of prescription medication by a physician assistant shall be
6 subject to the provisions of section 12-22-121 (6).

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

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

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

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

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

20 (d) ~~The board may determine whether any applicant for licensure~~
21 ~~as a physician assistant possesses education, experience, or training in~~
22 ~~health care that is sufficient to be accepted in lieu of the qualifications~~
23 ~~required for licensure under subparagraph (I) of paragraph (c) of this~~
24 ~~subsection (5). Every person who desires to qualify for practice as a~~
25 ~~physician assistant within this state shall file with the secretary of the~~
26 ~~board his or her written application for licensure, on which application he~~
27 ~~or she shall list any act the commission of which would be grounds for~~

1 ~~disciplinary action against a licensed physician assistant under section~~
2 ~~12-36-117, along with an explanation of the circumstances of such act.~~

3 ~~The board may deny licensure to any applicant who has performed any act~~
4 ~~that constitutes unprofessional conduct, as defined in section 12-36-117.~~

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

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

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

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

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

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

8 **SECTION 33. Repeal of provisions being relocated in this act.**

9 12-36-107 (3) and (4), Colorado Revised Statutes, are repealed.

10 **SECTION 34.** Part 1 of article 36 of title 12, Colorado Revised
11 Statutes, is amended BY THE ADDITION OF THE FOLLOWING NEW
12 SECTIONS CONTAINING RELOCATED PROVISIONS, WITH
13 AMENDMENTS, to read:

14 **12-36-107.2. [Formerly 12-36-107 (3)] Distinguished foreign**
15 **teaching physician license - qualifications.**

16 ~~(3)~~ ~~(a)~~ ~~(F)~~ (1) Notwithstanding any other provision of this article, an
17 applicant of noteworthy and recognized professional attainment who is
18 a graduate of a foreign medical school and who is licensed in a foreign
19 jurisdiction, if that jurisdiction has a licensing procedure, may be granted
20 a distinguished foreign teaching physician license to practice medicine in
21 this state, upon application to the board in the manner determined by the
22 board, if the following conditions are met:

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

27 ~~(B)~~ (b) The applicant's medical practice is limited to that required

1 by his OR HER academic position, ~~and~~ the limitation is so designated on
2 the license in accordance with board procedure, and THE MEDICAL
3 PRACTICE is also limited to the core teaching hospitals affiliated with the
4 medical school, as identified by the board, on which ~~he~~ THE APPLICANT
5 is serving as a faculty member.

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

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

27 (4) The board may establish and charge a fee for ~~such~~ A

1 distinguished foreign teaching physician license pursuant to section
2 24-34-105, C.R.S., not to exceed the amount of the fee for a ~~two-year~~
3 renewal of a physician's license.

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

7 **12-36-107.3. [Formerly 12-36-107 (4)] Temporary license -**
8 **rules.** ~~(4)~~(a) (1) Notwithstanding any other provision of this article, an
9 applicant lawfully practicing medicine in another state or territory may be
10 granted a temporary license to practice medicine in this state, upon
11 application to the board in the manner determined by the board, if:

12 ~~(F)~~ (a) The applicant has been invited by the United States olympic
13 committee to provide medical services at the olympic training center at
14 Colorado Springs or to provide medical services at an event in this state
15 sanctioned by ~~such~~ THE OLYMPIC committee; ~~and~~

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

20 ~~(HH)~~ (c) The applicant's practice is limited to that required by the
21 United States olympic committee. ~~Such~~ THE APPLICANT SHALL PROVIDE
22 medical services ~~shall only be provided~~ to athletes or team personnel
23 registered to train at the olympic training center or registered to compete
24 in an event conducted under the sanction of the United States olympic
25 committee.

26 ~~(b)~~ (2) ~~Such~~ A temporary license ~~shall remain~~ IS EFFECTIVE AND
27 in force while the holder is providing medical services at the invitation of

1 the United States olympic committee and only during the time certified
2 to the board, ~~but not longer than~~ TO EXCEED ninety days ~~without~~ UNLESS
3 THE BOARD GRANTS AN extension. ~~by the board.~~

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

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

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

14 **12-36-107.4. [Formerly 12-36-106 (5) (c), (5) (d), (5) (e), (5) (f),**
15 **and (5) (i)] Physician assistant license - qualifications.** ~~(5)(e)~~ (1) To
16 ~~become~~ BE licensed AS a physician assistant UNDER THIS ARTICLE, AN
17 APPLICANT SHALL BE AT LEAST TWENTY-ONE YEARS OF AGE AND shall
18 have:

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

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

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

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

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

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

21 ~~(e)~~ (4) ~~No~~ A person licensed as a physician assistant ~~may~~ SHALL
22 NOT perform any act that constitutes the practice of medicine within a
23 hospital or nursing care facility that is licensed pursuant to part 1 of
24 article 3 of title 25, C.R.S., or that is required to obtain a certificate of
25 compliance pursuant to section 25-1.5-103 (1) (a) (II), C.R.S., without
26 authorization from the governing board of the hospital or nursing care
27 facility. ~~Such~~ THE governing board ~~shall have the authority to~~ MAY grant,

1 deny, or limit ~~such authority to~~ A PHYSICIAN ASSISTANT'S AUTHORIZATION
2 BASED ON its own established procedures.

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

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

16 **SECTION 35.** 12-36-129 (1), Colorado Revised Statutes, is
17 amended, WITH THE RELOCATION OF PROVISIONS, to read:

18 **12-36-129. Unauthorized practice - penalties.** (1) (a) Any
19 person who practices or offers or attempts to practice medicine OR
20 PRACTICE AS A PHYSICIAN ASSISTANT within this state without an active
21 license issued under this article commits a class 2 misdemeanor and shall
22 be punished as provided in section 18-1.3-501, C.R.S., for the first
23 offense, and, any person committing a second or subsequent offense
24 commits a class 6 felony and shall be punished as provided in section
25 18-1.3-401, C.R.S.

26 (b) **[Formerly 12-36-106 (5) (k)]** Any person who practices or
27 offers or attempts to practice as a physician assistant without an active

1 license issued under this article commits a class 2 misdemeanor and shall
2 be punished as provided in section 18-1.3-501, C.R.S., for the first
3 offense, and, for the second or any subsequent offense, the person
4 commits a class 6 felony and shall be punished as provided in section
5 18-1.3-401, C.R.S.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

25 **SECTION 37.** 12-36-111.5 (2) (b), (3) (a), and (5), Colorado
26 Revised Statutes, are amended to read:

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

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

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

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

1 index;

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

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

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

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

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

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

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

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

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

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

9 **SECTION 38.** Part 1 of article 36 of title 12, Colorado Revised
10 Statutes, is amended BY THE ADDITION OF A NEW SECTION,
11 WITH RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

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

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

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

20 ~~(d)~~ (IV) Is either:

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

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

1 ORGANIZATION.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

6 **SECTION 39.** The introductory portion to 12-36-107.6 (1),
7 Colorado Revised Statutes, is amended to read:

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

22 **SECTION 40.** 12-36-122.5, Colorado Revised Statutes, is
23 amended BY THE ADDITION OF A NEW SUBSECTION, WITH
24 RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

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

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

12 **SECTION 41. Repeal of provisions being relocated in this act.**

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

16 **SECTION 42. Repeal.** 12-36-111 (2), Colorado Revised

17 Statutes, is repealed as follows:

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

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

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

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

8 **SECTION 43. Repeal.** 12-36-113, Colorado Revised Statutes,
9 is repealed as follows:

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

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

25 ~~(3) Repealed.~~

26 **SECTION 44. Repeal.** 12-36-121, Colorado Revised Statutes,
27 is repealed as follows:

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

8 **SECTION 45.** 10-1-120, Colorado Revised Statutes, is amended
9 to read:

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

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

20 **SECTION 46.** 10-16-104 (1.4) (a) (II) (A), (1.4) (a) (VIII), and
21 (1.4) (a) (IX), Colorado Revised Statutes, are amended to read:

22 **10-16-104. Mandatory coverage provisions - definitions.**
23 (1.4) **Autism spectrum disorders.** (a) As used in this subsection (1.4),
24 unless the context otherwise requires:

25 (II) "Autism services provider" means any person who provides
26 direct services to a person with autism spectrum disorder, is licensed,
27 certified, or registered by the applicable state licensing board or by a

1 nationally recognized organization, and who meets one of the following:

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

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

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

16 **SECTION 47.** 11-70-102, Colorado Revised Statutes, is amended
17 to read:

18 **11-70-102. Title to property of trusts - liability of trust and**
19 **trustees.** The trustees of trusts established pursuant to this article shall
20 hold the legal title to all property at any time belonging to the trusts.
21 They shall have control over such property, as well as the control and
22 management of the business and affairs of the trust. Liability to third
23 persons for any act, omission, or obligation of a trustee of a trust, when
24 acting in such capacity, shall extend to the whole of the trust estate, or so
25 much thereof as may be necessary to discharge such obligation, but no
26 trustee shall be personally liable for any such act, omission, or obligation.
27 The trustees shall have such powers as to the investment of the trust estate

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

14 **SECTION 48.** 12-22-703 (1) (c), Colorado Revised Statutes, is
15 amended to read:

16 **12-22-703. Advisory committee - duties - repeal.** (1) There is
17 hereby created within the division, the prescription controlled substance
18 abuse monitoring advisory committee. The committee shall consist of the
19 following eleven members:

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

23 **SECTION 49.** 12-30-101 (5), Colorado Revised Statutes, is
24 amended to read:

25 **12-30-101. Definitions.** As used in this article, unless the context
26 otherwise requires:

27 (5) "Licensed physician or osteopath" means a person licensed to

1 practice medicine under ~~the provisions of~~ article 36 of this title, by the
2 Colorado ~~state~~ MEDICAL board of ~~medical examiners~~ or its successor.

3 **SECTION 50.** 12-32-102 (1), Colorado Revised Statutes, is
4 amended to read:

5 **12-32-102. Podiatry license required - professional liability**
6 **insurance required - exceptions.** (1) It is unlawful for any person to
7 practice podiatry within the state of Colorado who does not hold a license
8 to practice medicine issued by the Colorado ~~state~~ MEDICAL board of
9 ~~medical examiners~~ or a license to practice podiatry issued by the
10 Colorado podiatry board as provided by this article. A podiatry license
11 is not required for a person serving a one-year or two-year approved
12 residency program. Such persons must register with the Colorado
13 podiatry board in such manner and form as ~~such~~ THE board shall
14 prescribe. As used in this section, an "approved residency" is a residency
15 in a hospital conforming to the minimum standards for residency training
16 established or approved by the Colorado podiatry board, which has the
17 authority, upon its own investigation, to approve any residency.

18 **SECTION 51.** 12-32-109.3 (1) and (3), Colorado Revised
19 Statutes, are amended to read:

20 **12-32-109.3. Use of physician assistants.** (1) A person licensed
21 under the laws of this state to practice podiatry may delegate to a
22 physician assistant licensed by the Colorado ~~state~~ MEDICAL board of
23 ~~medical examiners~~ pursuant to ~~section 12-36-106 (5)~~ SECTION
24 12-36-107.3 the authority to perform acts ~~which~~ THAT constitute the
25 practice of podiatry to the extent and in the manner authorized by rules
26 ~~and regulations~~ promulgated by the Colorado podiatry board, including
27 the authority to prescribe, on a case-by-case basis and per-patient-visit

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

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

15 **SECTION 52.** 12-32-119, Colorado Revised Statutes, is amended
16 to read:

17 **12-32-119. Existing licenses and proceedings.** (1) Nothing in
18 the act contained in chapter 105, Session Laws of Colorado 1979, shall
19 be construed to invalidate the license of any person holding a valid,
20 unrevoked, and unsuspended license on June 30, 1979, to practice
21 podiatry in this state or to affect any disciplinary proceeding or appeal
22 pending on June 30, 1979, or any appointment to the Colorado ~~state~~
23 ~~MEDICAL board of medical examiners~~ or the Colorado podiatry board or
24 an inquiry panel or hearings panel thereof made on or before June 30,
25 1979.

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

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

7 **SECTION 53.** 12-36-106.5, Colorado Revised Statutes, is
8 amended to read:

9 **12-36-106.5. Child health associates - scope of practice.** On
10 and after July 1, 1990, any person who, on June 30, 1990, was certified
11 only as a child health associate under the laws of this state shall, upon
12 application to the board, be granted licensure as a physician assistant.
13 The practice of any such person shall be subject to ~~the provisions of~~
14 section 12-36-106 (5) AND 12-36-107.3; except that such practice shall be
15 limited to patients under the age of twenty-one.

16 **SECTION 54.** 12-36-114 (1), Colorado Revised Statutes, is
17 amended to read:

18 **12-36-114. Issuance of licenses - prior practice prohibited.**
19 (1) If the board determines that an applicant possesses the qualifications
20 required by this article, ~~and is entitled thereto~~ the board shall issue TO THE
21 APPLICANT a license to practice medicine. ~~which shall be signed by the~~
22 ~~president or vice-president, attested by the secretary, and sealed with the~~
23 ~~seal of the board.~~

24 **SECTION 55. Repeal.** 12-36-124, Colorado Revised Statutes,
25 is repealed as follows:

26 **12-36-124. Certification of licensing.** ~~Upon request therefor and~~
27 ~~the payment of a fee determined pursuant to section 24-34-105, C.R.S.,~~

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

7 **SECTION 56.** 12-36-201 (2), Colorado Revised Statutes, is
8 amended to read:

9 **12-36-201. Legislative declaration.** (2) It is the intent of the
10 general assembly that physicians licensed to practice medicine utilizing
11 unlicensed persons in their practices provide those persons with a
12 minimum level of education and training before allowing them to operate
13 machine sources of ionizing radiation; however, it is not the general
14 assembly's intent to discourage education and training beyond this
15 minimum. It is further the intent of the general assembly that established
16 minimum training and education requirements correspond as closely as
17 possible to the requirements of each particular work setting as determined
18 by the Colorado ~~state~~ MEDICAL board of ~~medical examiners~~ pursuant to
19 this part 2.

20 **SECTION 57.** 12-36-202 (1) (a), Colorado Revised Statutes, is
21 amended to read:

22 **12-36-202. Board authorized to issue rules.** (1) (a) The
23 Colorado ~~state~~ MEDICAL board of ~~medical examiners~~ shall adopt rules and
24 ~~regulations~~ prescribing minimum standards for the qualifications,
25 education, and training of unlicensed persons operating machine sources
26 of ionizing radiation and administering such radiation to patients for
27 diagnostic medical use. No licensed physician shall allow any unlicensed

1 person to operate any machine source of ionizing radiation or to
2 administer any such radiation to any patient unless such person has met
3 the standards then in effect under rules ~~and regulations~~ adopted pursuant
4 to this section. The board may adopt rules ~~and regulations~~ allowing a
5 grace period in which newly hired operators of machine sources of
6 ionizing radiation shall receive the training required pursuant to this
7 section.

8 **SECTION 58.** 12-36.5-101, Colorado Revised Statutes, is
9 amended to read:

10 **12-36.5-101. Legislative declaration.** (1) The general assembly
11 hereby finds, determines, and declares that the Colorado ~~state~~ MEDICAL
12 board ~~of medical examiners~~ created pursuant to article 36 of this title acts
13 for the state in its sovereign capacity to govern licensure, discipline, and
14 professional review of persons licensed to practice medicine in this state.
15 The general assembly further finds, determines, and declares that the
16 authority to practice medicine in this state is a privilege granted by the
17 legislative authority of the state and that it is necessary for the health,
18 safety, and welfare of the people of this state that the COLORADO
19 MEDICAL board ~~of medical examiners~~ exercise its authority to protect the
20 people of this state from the unauthorized practice of medicine and from
21 unprofessional conduct by persons licensed to practice medicine under
22 article 36 of this title.

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

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

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

12 **SECTION 59.** 12-36.5-102 (1), Colorado Revised Statutes, is
13 amended to read:

14 **12-36.5-102. Definitions.** As used in this article, unless the
15 context otherwise requires:

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

19 **SECTION 60.** 12-36.5-103 (1) and (3) (a), Colorado Revised
20 Statutes, are amended to read:

21 **12-36.5-103. Use of professional review committees.** (1) The
22 general assembly recognizes that the MEDICAL board, ~~of medical~~
23 ~~examiners~~, while assuming and retaining ultimate authority for licensure
24 and discipline in accordance with article 36 of this title and in accordance
25 with this article, cannot practically and economically assume
26 responsibility over every single allegation or instance of purported
27 deviation from the standards of quality for the practice of medicine, from

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

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

15 **SECTION 61.** The introductory portion to 12-36.5-104 (4) and
16 12-36.5-104 (4) (d), (4) (f), (5), (6) (a) (I), (7) (f), (9), and (11), Colorado
17 Revised Statutes, are amended to read:

18 **12-36.5-104. Establishment of professional review committees**
19 **- function - rules.** (4) Any professional review committee established
20 by any of the following organizations, entities, or professional societies
21 shall be an approved professional review committee under this article if
22 it operates pursuant to written bylaws, policies, or procedures ~~which~~ THAT
23 are in compliance with this article and ~~which~~ THAT have been approved
24 by its governing board:

25 (d) A society or association of physicians licensed to practice and
26 residing in this state and specializing in a specific discipline of medicine,
27 whose society or association has been designated by the MEDICAL board

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

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

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

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

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

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

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

27 (9) All governing boards ~~which~~ THAT are required to report their

1 final actions to the MEDICAL board ~~of medical examiners~~ are not
2 otherwise relieved of such obligations by virtue of any provision of this
3 article.

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

9 **SECTION 62.** 12-36.5-104.4 (3), Colorado Revised Statutes, is
10 amended to read:

11 **12-36.5-104.4. Hospital professional review committees.**

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

15 **SECTION 63.** 12-36.5-106 (1), (2), (9) (n), and (10) (b),
16 Colorado Revised Statutes, are amended to read:

17 **12-36.5-106. Committee on anticompetitive conduct.** (1) There
18 ~~shall be~~ IS HEREBY established a permanent, independent committee of the
19 MEDICAL board, ~~of medical examiners~~ to be known as the committee on
20 anticompetitive conduct, ALSO referred to in this section as "the
21 committee".

22 (2) The committee shall be composed of five persons, none of
23 whom shall be a member of the MEDICAL board. ~~of medical examiners.~~
24 Four members of the committee shall be licensed to practice medicine and
25 actively engaged in the practice of medicine in this state and shall be
26 appointed by the MEDICAL board. ~~of medical examiners.~~ No member
27 shall practice in the same medical subspecialty as any other member nor

1 conduct his OR HER primary practice in the same county as any other
2 member. One member shall be appointed by the governor and shall be an
3 attorney licensed to practice in this state who has particular expertise and
4 experience in the area of antitrust law.

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

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

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

19 **SECTION 64.** 12-36.5-202, Colorado Revised Statutes, is
20 amended to read:

21 **12-36.5-202. Rules - compliance with reporting requirements**
22 **of federal act.** Upon implementation of the federal "Health Care Quality
23 Improvement Act of 1986", as amended, 42 U.S.C. secs. 11101 through
24 11152, and upon implementation of the federal data bank, the MEDICAL
25 board of ~~medical examiners~~ shall promulgate rules and regulations to
26 comply with such act, which rules and regulations are consistent with the
27 standards and the reporting requirements of such act.

1 **SECTION 65.** 12-38-111.6 (4) (d) (III) and (7), Colorado
2 Revised Statutes, are amended to read:

3 **12-38-111.6. Prescriptive authority - advanced practice nurses**
4 **- rules - repeal.** (4) An advanced practice nurse applying for
5 prescriptive authority before July 1, 2010, shall provide evidence to the
6 board of the following:

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

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

21 **SECTION 66.** 13-4-102 (2) (f), Colorado Revised Statutes, is
22 amended to read:

23 **13-4-102. Jurisdiction.** (2) The court of appeals shall have
24 initial jurisdiction to:

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

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

2 **SECTION 67.** 13-64-302.5 (1), Colorado Revised Statutes, is
3 amended to read:

4 **13-64-302.5. Exemplary damages - legislative declaration -**
5 **limitations - distribution of damages collected.** (1) The general
6 assembly hereby finds, determines, and declares that it is in the public
7 interest to establish a consistent and uniformly applicable standard for the
8 determination, amount, imposition, and distribution of exemplary
9 monetary damages arising from civil actions and arbitration proceedings
10 alleging professional negligence in the practice of medicine. It is the
11 intent of the general assembly that any such exemplary damages serve the
12 public purposes of deterring negligent acts and where appropriate provide
13 a form of punishment that is in addition to the disciplinary and licensing
14 sanctions available to the ~~state~~ COLORADO MEDICAL board. ~~of medical~~
15 ~~examiners.~~

16 **SECTION 68.** The introductory portion to 13-90-107 (1) (d) and
17 13-90-107 (1) (d) (III) (C), and (2), Colorado Revised Statutes, are
18 amended to read:

19 **13-90-107. Who may not testify without consent.** (1) There are
20 particular relations in which it is the policy of the law to encourage
21 confidence and to preserve it inviolate; therefore, a person shall not be
22 examined as a witness in the following cases:

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

1 the patient, but this paragraph (d) shall not apply to:

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

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

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

15 **SECTION 69.** 17-1-101 (3) (b), Colorado Revised Statutes, is
16 amended to read:

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

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

13 **SECTION 70.** 17-1-103 (3) (a) (III), Colorado Revised Statutes,
14 is amended to read:

15 **17-1-103. Duties of the executive director.** (3) (a) (III) The
16 executive director shall determine the qualifications for appointment to
17 the panel of medical consultants; except that all members of the panel
18 shall be licensed by the ~~state~~ COLORADO MEDICAL board ~~of medical~~
19 ~~examiners~~ pursuant to ~~the provisions of~~ article 36 of title 12, C.R.S., or
20 the state board of dental examiners pursuant to ~~the provisions of~~ article
21 35 of title 12, C.R.S.

22 **SECTION 71.** 17-2-201 (5.7) (d), Colorado Revised Statutes, is
23 amended to read:

24 **17-2-201. State board of parole.** (5.7) If, as a condition of
25 parole, an offender is required to undergo counseling or treatment, unless
26 the parole board determines that treatment at another facility or with
27 another person is warranted, such treatment or counseling shall be at a

1 facility or with a person:

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

8 **SECTION 72.** 17-27.1-101 (5) (a) (IV), Colorado Revised
9 Statutes, is amended to read:

10 **17-27.1-101. Nongovernmental facilities for offenders -**
11 **registration - notifications - penalties.** (5) No private treatment
12 program in Colorado shall admit or accept a supervised or unsupervised
13 person into the program unless that program:

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

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

23 **SECTION 73.** 18-1.3-204 (2) (c) (IV), Colorado Revised
24 Statutes, is amended to read:

25 **18-1.3-204. Conditions of probation.** (2) (c) If the court orders
26 counseling or treatment as a condition of probation, unless the court
27 makes a specific finding that treatment in another facility or with another

1 person is warranted, the court shall order that such treatment or
2 counseling be at a facility or with a person:

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

9 **SECTION 74.** 18-18-103, Colorado Revised Statutes, is amended
10 to read:

11 **18-18-103. Special definition - board.** As used in parts 1 and 2
12 of this article, "board" means the state board of pharmacy. As used in
13 parts 3, 4, 5, and 6 of this article, "board" means the respective licensing
14 board responsible for licensing and registering practitioners or other
15 persons who are subject to registration pursuant to part 3 of this article.
16 For physicians the respective board is the Colorado ~~state~~ MEDICAL board,
17 ~~of medical examiners~~, for podiatrists the respective board is the Colorado
18 podiatry board, for dentists the respective board is the state board of
19 dental examiners, for optometrists the respective board is the state board
20 of optometric examiners, for pharmacists and pharmacies the respective
21 board is the state board of pharmacy, for veterinarians the respective
22 board is the state board of veterinary medicine, and for manufacturers,
23 distributors, and humane societies the respective board is the state board
24 of pharmacy.

25 **SECTION 75.** 18-18-302 (1), Colorado Revised Statutes, is
26 amended to read:

27 **18-18-302. Registration requirements.** (1) Every person who

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

22 **SECTION 76.** 23-20-114 (1), Colorado Revised Statutes, is
23 amended to read:

24 **23-20-114. Employment of medical personnel.** (1) The board
25 of regents of the university of Colorado has authority to employ medical
26 personnel WHO ARE not citizens of the United States at the university of
27 Colorado health sciences center, the university of Colorado psychiatric

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

25 **SECTION 77.** 24-1-122 (3) (m) (I), Colorado Revised Statutes,
26 is amended to read:

27 **24-1-122. Department of regulatory agencies - creation.**

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

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

6 **SECTION 78.** 24-34-109 (1) (d) (I), (2) (a) (II), and (6) (a),
7 Colorado Revised Statutes, are amended to read:

8 **24-34-109. Nurse-physician advisory task force for Colorado**
9 **health care - creation - duties - definition - repeal.** (1) There is hereby
10 created, within the division of registrations in the department of
11 regulatory agencies, the nurse-physician advisory task force for Colorado
12 health care, referred to in this section as "NPATCH". The purpose of
13 NPATCH is to promote public safety and improve health care in
14 Colorado by supporting collaboration and communication between the
15 practices of nursing and medicine. The NPATCH shall:

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

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

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

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

27 (6) (a) The NPATCH shall make recommendations to the state

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

7 **SECTION 79.** 24-60-3101, Colorado Revised Statutes, is
8 amended to read:

9 **24-60-3101. Legislative declaration.** The general assembly
10 hereby finds that a lack of access to quality, affordable health care
11 services is an increasing problem, both in Colorado and nationwide, and
12 contributes to the spiraling costs of health care for individuals and
13 businesses. This problem could be alleviated by greater interstate
14 cooperation among, and mobility of, medical professionals through the
15 use of telemedicine and other means. Therefore, it is desirable to
16 authorize the executive director of the department of regulatory agencies,
17 together with the ~~state~~ COLORADO MEDICAL board of ~~medical~~
18 ~~examiners~~ created in section 12-36-103, C.R.S., and the state board of nursing
19 created in section 12-38-104, C.R.S., and in consultation with
20 representatives of other relevant state agencies, to negotiate one or more
21 interstate compacts endorsing model legislation to facilitate the efficient
22 distribution of health care services across state lines.

23 **SECTION 80.** The introductory portion to 24-60-3103 (1),
24 Colorado Revised Statutes, is amended to read:

25 **24-60-3103. Model legislation - compacts authorized.** (1) The
26 executive director, together with the ~~state~~ COLORADO MEDICAL board of
27 ~~medical~~~~examiners~~ created in section 12-36-103, C.R.S., and the state

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

11 **SECTION 81.** 25-1-108.7 (6) (c), Colorado Revised Statutes, is
12 amended to read:

13 **25-1-108.7. Health care credentials uniform application act -**
14 **legislative declaration - definitions - state board of health rules.**

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

18 **SECTION 82.** 25-3-107, Colorado Revised Statutes, is amended
19 to read:

20 **25-3-107. Disciplinary actions reported to Colorado medical**
21 **board or podiatry board.** (1) Any disciplinary action to suspend,
22 revoke, or otherwise limit the privileges of a licensed physician or
23 podiatrist ~~which~~ THAT is taken by the governing board of a hospital
24 required to be licensed or certified pursuant to this part 1 or required to
25 obtain a certificate of compliance pursuant to section 25-1.5-103 (1) (a)
26 (I) or (1) (a) (II) shall be reported to the Colorado ~~state~~ MEDICAL board of
27 ~~medical examiners~~ or the Colorado podiatry board, whichever board is

1 appropriate, in the form prescribed by said board.

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

6 **SECTION 83.** 27-1-102 (2) (c), Colorado Revised Statutes, is
7 amended to read:

8 **27-1-102. Executive director - division heads - interagency**
9 **council - advisory boards.** (2) (c) All such personnel as cannot satisfy
10 all of the requirements set forth in paragraph (b) of this subsection (2)
11 shall be exempt from ~~the provisions of~~ the "Colorado Medical Practice
12 Act", article 36 of title 12, C.R.S., with respect to services rendered to
13 bona fide patients or inmates at said institutions, if such personnel are of
14 good moral character, are graduates of an approved medical college as
15 defined in section ~~12-36-108~~ 12-36-102.5, C.R.S., have completed an
16 approved internship of at least one year as defined in section ~~12-36-109~~
17 12-36-102.5, C.R.S., and, within ~~a period of~~ nine months ~~of their~~
18 ~~employment~~ AFTER FIRST BEING EMPLOYED, pass the examinations
19 approved by the Colorado ~~state~~ MEDICAL board ~~of medical examiners~~
20 under ~~the provisions of~~ the "Colorado Medical Practice Act" and the
21 national board of medical examiners, the national board of examiners for
22 osteopathic physicians and surgeons, or the federation of state medical
23 boards, OR THEIR SUCCESSOR ORGANIZATIONS, on subjects relating to the
24 basic sciences, are able to read, write, speak, and understand the English
25 language, and, in the case of personnel who are not citizens of the United
26 States, become ~~such~~ citizens within the minimum period of time within
27 which the particular individual can become a citizen according to the laws

1 of the United States and the regulations of the immigration and
2 naturalization service of the United States department of justice or within
3 such additional time as may be granted by said boards.

4 **SECTION 84.** 27-1-103 (3) (a) (III), Colorado Revised Statutes,
5 is amended to read:

6 **27-1-103. Duties of executive director - governor acquire**
7 **water rights - rules.** (3) (a) (III) The executive director shall determine
8 the qualifications for appointment to the board of medical consultants;
9 except that all members of the board shall be licensed by the ~~state~~
10 COLORADO MEDICAL board of ~~medical examiners~~ pursuant to the
11 ~~provisions of~~ article 36 of title 12, C.R.S.

12 **SECTION 85. Specified effective date.** This act shall take effect
13 July 1, 2010.

14 **SECTION 86. Safety clause.** The general assembly hereby finds,
15 determines, and declares that this act is necessary for the immediate
16 preservation of the public peace, health, and safety.