

SENATE COMMITTEE OF REFERENCE REPORT

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Chair of Committee

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Date

March 7, 2019

Committee on Health & Human Services.

After consideration on the merits, the Committee recommends the following:

SB19-052 be amended as follows, and as so amended, be referred to the Committee on Appropriations with favorable recommendation:

1 Amend printed bill, strike everything below the enacting clause and  
2 substitute:

3 "SECTION 1. In Colorado Revised Statutes, 25-3.5-103, **add**  
4 **with amended and relocated provisions** (8.8) as follows:

5 **25-3.5-103. Definitions.** As used in this article 3.5, unless the  
6 context otherwise requires:

7 (8.8) [**Formerly 25-3.5-203 (5)**] ~~For the purposes of this article,~~  
8 ~~unless the context otherwise requires,~~ "Medical direction" includes, but  
9 is not limited to, the following:

10 (a) Approval of the medical components of treatment protocols  
11 and appropriate prearrival instructions;

12 (b) Routine review of program performance and maintenance of  
13 active involvement in quality improvement activities, including access to  
14 dispatch tapes as necessary for the evaluation of procedures;

15 (c) Authority to recommend appropriate changes to protocols for  
16 the improvement of patient care; and

17 (d) ~~Provide~~ PROVISION OF oversight for the ongoing education,  
18 training, and quality assurance for providers of emergency care.

19 SECTION 2. In Colorado Revised Statutes, 25-3.5-203, **amend**  
20 (1)(b)(IV) and (1)(b)(V); and **add** (1)(b)(VI) as follows:

21 **25-3.5-203. Emergency medical service providers -**  
22 **certification - renewal of certificate - duties of department - rules -**  
23 **criminal history record checks - definitions.** (1) (b) The department

1 shall certify emergency medical service providers. The board shall adopt  
2 rules for the certification of emergency medical service providers. The  
3 rules must include the following:

4 (IV) Disciplinary sanctions, which ~~shall~~ MUST include provisions  
5 for the denial, revocation, and suspension of certificates and the  
6 suspension and probation of certificate holders; ~~and~~

7 (V) An appeals process pursuant to sections 24-4-104 and  
8 24-4-105 ~~C.R.S.~~, that is applicable to department decisions in connection  
9 with certifications and sanctions; AND

10 (VI) A STATEMENT THAT AN EMERGENCY MEDICAL SERVICE  
11 PROVIDER MAY PRACTICE IN A CLINICAL SETTING, AS DEFINED IN SECTION  
12 25-3.5-207 (1)(a), SUBJECT TO THE REQUIREMENTS OF SECTION 25-3.5-207  
13 AND RULES ADOPTED BY THE BOARD.

14 **SECTION 3.** In Colorado Revised Statutes, 25-3.5-205, **amend**  
15 (2) and (5)(a) as follows:

16 **25-3.5-205. Emergency medical service providers -**  
17 **investigation - discipline.** (2) An emergency medical service provider,  
18 THE MEDICAL SUPERVISOR OF AN EMERGENCY MEDICAL SERVICE PROVIDER  
19 IN A CLINICAL SETTING, AS THOSE TERMS ARE DEFINED IN SECTION  
20 25-3.5-207 (1), the employer of an emergency medical service provider,  
21 a medical director, and a physician providing medical direction of an  
22 emergency medical service provider shall report to the department any  
23 misconduct that is known or reasonably believed by the person to have  
24 occurred.

25 (5) For the purposes of this section:

26 (a) "Medical director" means a physician who ~~supervises certified~~  
27 PROVIDES MEDICAL DIRECTION TO emergency medical service providers  
28 consistent with the rules adopted by the ~~executive~~ director or chief  
29 medical officer, as applicable, under section 25-3.5-206.

30 **SECTION 4.** In Colorado Revised Statutes, 25-3.5-206, **amend**  
31 (4)(a) introductory portion, (4)(a)(III), and (4)(a.5)(I); and **add** (5) as  
32 follows:

33 **25-3.5-206. Emergency medical practice advisory council -**  
34 **creation - powers and duties - emergency medical service provider**  
35 **scope of practice - definitions - rules.** (4) (a) The director or, if the  
36 director is not a physician, the chief medical officer shall adopt rules in  
37 accordance with article 4 of title 24 ~~C.R.S.~~, concerning the scope of  
38 practice of emergency medical service providers. ~~for prehospital care.~~ The  
39 rules must include the following:

40 (III) Criteria for requests to waive the scope of practice rules IN A  
41 PREHOSPITAL SETTING and the conditions for ~~such~~ THE waivers;

1 (a.5) (I) ~~On or before January 1, 2018,~~ The director or, if the  
2 director is not a physician, the chief medical officer shall adopt rules in  
3 accordance with article 4 of title 24 ~~C.R.S.~~, concerning the scope of  
4 practice of a community paramedic. An emergency medical service  
5 provider's endorsement as a community paramedic, issued pursuant to the  
6 rules adopted under section 25-3.5-203.5, is valid for as long as the  
7 emergency medical service provider maintains ~~his or her~~ certification by  
8 the department.

9 (5) AS USED IN THIS SECTION:

10 (a) "INTERFACILITY TRANSPORT" HAS THE MEANING SET FORTH IN  
11 SECTION 25-3.5-207 (1)(c).

12 (b) "PREHOSPITAL SETTING" MEANS ONE OF THE FOLLOWING  
13 SETTINGS IN WHICH AN EMERGENCY MEDICAL SERVICE PROVIDER  
14 PERFORMS PATIENT CARE, WHICH CARE IS SUBJECT TO MEDICAL DIRECTION  
15 BY A MEDICAL DIRECTOR:

16 (I) AT THE SITE OF AN EMERGENCY;

17 (II) DURING EMERGENCY TRANSPORT; OR

18 (III) DURING INTERFACILITY TRANSPORT.

19 (c) "SCOPE OF PRACTICE" HAS THE MEANING SET FORTH IN SECTION  
20 25-3.5-207 (1)(f).

21 **SECTION 5.** In Colorado Revised Statutes, **add** 25-3.5-207 as  
22 follows:

23 **25-3.5-207. Ability of certified emergency medical service**  
24 **providers to work in clinical settings - restrictions - definitions -**  
25 **rules.** (1) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE  
26 REQUIRES:

27 (a) "CLINICAL SETTING" MEANS A HEALTH FACILITY LICENSED OR  
28 CERTIFIED BY THE DEPARTMENT PURSUANT TO SECTION 25-1.5-103 (1)(a).

29 (b) "IN-SCOPE TASKS AND PROCEDURES" MEANS TASKS AND  
30 PROCEDURES PERFORMED BY AN EMERGENCY MEDICAL SERVICE PROVIDER  
31 WITHIN THE EMERGENCY MEDICAL SERVICE PROVIDER'S SCOPE OF  
32 PRACTICE.

33 (c) "INTERFACILITY TRANSPORT" MEANS THE MOVEMENT OF A  
34 PATIENT FROM ONE LICENSED HEALTH CARE FACILITY TO ANOTHER  
35 LICENSED HEALTH CARE FACILITY.

36 (d) "MEDICAL SUPERVISION" MEANS THE OVERSIGHT, GUIDANCE,  
37 AND INSTRUCTIONS THAT A MEDICAL SUPERVISOR PROVIDES TO AN  
38 EMERGENCY MEDICAL SERVICE PROVIDER.

39 (e) "MEDICAL SUPERVISOR" MEANS A COLORADO-LICENSED  
40 PHYSICIAN, PHYSICIAN ASSISTANT, ADVANCED PRACTICE NURSE, OR  
41 REGISTERED NURSE.

1 (f) "SCOPE OF PRACTICE" MEANS THE TASKS, MEDICATIONS, AND  
2 PROCEDURES THAT AN EMERGENCY MEDICAL SERVICE PROVIDER IS  
3 AUTHORIZED TO PERFORM OR ADMINISTER IN ACCORDANCE WITH SECTIONS  
4 25-3.5-203 AND 25-3.5-206 AND RULES PROMULGATED PURSUANT TO  
5 THOSE SECTIONS.

6 (2) IN ACCORDANCE WITH THE LIMITATIONS CONTAINED IN THIS  
7 ARTICLE 3.5, AN EMERGENCY MEDICAL SERVICE PROVIDER MAY WORK IN  
8 A CLINICAL SETTING SUBJECT TO THE FOLLOWING CONDITIONS:

9 (a) THE EMERGENCY MEDICAL SERVICE PROVIDER MAY PERFORM  
10 ONLY TASKS AND PROCEDURES THAT ARE WITHIN THE EMERGENCY  
11 MEDICAL SERVICE PROVIDER'S APPLICABLE SCOPE OF PRACTICE;

12 (b) THE EMERGENCY MEDICAL SERVICE PROVIDER SHALL PERFORM  
13 IN-SCOPE TASKS AND PROCEDURES PURSUANT TO ORDERS OR  
14 INSTRUCTIONS FROM, AND UNDER THE MEDICAL SUPERVISION OF, A  
15 MEDICAL SUPERVISOR;

16 (c) MEDICAL SUPERVISION MUST BE PROVIDED BY A MEDICAL  
17 SUPERVISOR WHO IS IMMEDIATELY AVAILABLE AND PHYSICALLY PRESENT  
18 AT THE CLINICAL SETTING WHERE THE CARE IS BEING DELIVERED TO  
19 PROVIDE OVERSIGHT, GUIDANCE, OR INSTRUCTION TO THE EMERGENCY  
20 MEDICAL SERVICE PROVIDER DURING THE EMERGENCY MEDICAL SERVICE  
21 PROVIDER'S PERFORMANCE OF IN-SCOPE TASKS AND PROCEDURES;

22 (d) THE MEDICAL SUPERVISOR OF THE EMERGENCY MEDICAL  
23 SERVICE PROVIDER MUST BE LICENSED IN GOOD STANDING; AND

24 (e) EACH CLINICAL SETTING AT WHICH AN EMERGENCY MEDICAL  
25 SERVICE PROVIDER PERFORMS IN-SCOPE TASKS AND PROCEDURES  
26 PURSUANT TO THIS SECTION SHALL, IN COLLABORATION WITH ITS MEDICAL  
27 STAFF, ESTABLISH OPERATING POLICIES AND PROCEDURES THAT ENSURE  
28 THAT EMERGENCY MEDICAL SERVICE PROVIDERS PERFORM TASKS AND  
29 PROCEDURES AND ADMINISTER MEDICATIONS WITHIN THEIR SCOPE OF  
30 PRACTICE.

31 (3) NOTHING IN THIS SECTION ALTERS THE AUTHORITY OF A  
32 PHYSICIAN OR REGISTERED NURSE IN A CLINICAL SETTING TO DELEGATE  
33 ACTS, INCLUDING THE ADMINISTRATION OF MEDICATIONS, THAT ARE  
34 OUTSIDE OF AN EMERGENCY MEDICAL SERVICE PROVIDER'S SCOPE OF  
35 PRACTICE PURSUANT TO SECTIONS 12-36-106 OR 12-38-132, AS  
36 APPROPRIATE.

37 (4) THE BOARD MAY PROMULGATE RULES AS NECESSARY TO  
38 IMPLEMENT THIS SECTION.

39 **SECTION 6. Repeal of provisions being relocated in this act.**  
40 In Colorado Revised Statutes, **repeal** 25-3.5-203 (5).

41 **SECTION 7. Act subject to petition - effective date -**

1 **applicability.** (1) This act takes effect at 12:01 a.m. on the day following  
2 the expiration of the ninety-day period after final adjournment of the  
3 general assembly (August 2, 2019, if adjournment sine die is on May 3,  
4 2019); except that, if a referendum petition is filed pursuant to section 1  
5 (3) of article V of the state constitution against this act or an item, section,  
6 or part of this act within such period, then the act, item, section, or part  
7 will not take effect unless approved by the people at the general election  
8 to be held in November 2020 and, in such case, will take effect on the  
9 date of the official declaration of the vote thereon by the governor.  
10 (2) This act applies to conduct occurring on or after the applicable  
11 effective date of this act."

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