

First Regular Session
Seventy-third General Assembly
STATE OF COLORADO

ENGROSSED

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

LLS NO. 21-0130.01 Christy Chase x2008

SENATE BILL 21-158

SENATE SPONSORSHIP

Danielson and Pettersen,

HOUSE SPONSORSHIP

Titone and Duran,

Senate Committees

Health & Human Services
Appropriations

House Committees

A BILL FOR AN ACT

101 **CONCERNING MODIFICATIONS TO THE COLORADO HEALTH SERVICE**
102 **CORPS PROGRAM ADMINISTERED BY THE DEPARTMENT OF**
103 **PUBLIC HEALTH AND ENVIRONMENT TO EXPAND THE**
104 **AVAILABILITY OF GERIATRIC CARE PROVIDERS IN SHORTAGE**
105 **AREAS IN THE STATE, AND, IN CONNECTION THEREWITH, MAKING**
106 **AN APPROPRIATION.**

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://leg.colorado.gov>.)

The bill modifies the Colorado health service corps program

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

SENATE
Amended 2nd Reading
May 18, 2021

administered by the primary care office (office) in the department of public health and environment, which program includes a loan repayment program, as follows:

- Allows geriatric advanced practice providers, which include advanced practice registered nurses and physician assistants with geriatric training or experience, to participate in the loan repayment program on the condition of committing to provide geriatric care to older adults in health professional shortage areas for a specified period; and
- Requires the general assembly to annually and continuously appropriate money from the general fund to the office for the 2021-22 through the 2025-26 fiscal years to help repay loans for geriatric advanced practice providers.

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

2 **SECTION 1. Legislative declaration.** (1) The general assembly
3 finds and determines that:

4 (a) Colorado currently has approximately 840,000 residents over
5 65 years of age, and that number is expected to grow to 1.2 million by
6 2030, a 43% increase in that population in 10 years;

7 (b) Additionally, the statewide population of residents over 75
8 years of age is approximately 327,000 and is expected to grow to 559,000
9 by 2030, a nearly 71% increase in that population in 10 years;

10 (c) Colorado is estimated to have 125,000 residents afflicted with
11 dementia by 2030, including an estimated 25,000 residing in rural areas
12 of the state;

13 (d) Geriatric specialists, including advanced practice providers
14 with geriatric training or experience, provide a patient-centered, holistic
15 approach to care and are highly trained to care for patients with dementia
16 and their families;

17 (e) Each geriatric specialist is typically able to care for

1 approximately 700 patients in an urban setting and fewer patients in a
2 rural setting;

3 (f) Currently, the number of Colorado health-care providers with
4 training in geriatrics is far short of the number of providers needed, and
5 the number is expected to be drastically short of the 2030 projected need
6 for geriatric-trained health-care providers;

7 (g) Advanced practice providers, including advanced practice
8 registered nurses and physician assistants, who have additional training
9 or experience in geriatrics, are critical to address the shortage in geriatric
10 specialists and to provide the level of care required for the state's growing
11 aging population;

12 (h) According to reliable sources such as the Colorado department
13 of public health and environment's 2015 report, *Healthy Aging in*
14 *Colorado*, rural areas of the state are woefully ill-equipped to support
15 aging populations, with rural counties in the southern and eastern parts of
16 the state bearing a higher proportion of the burden of inadequate
17 resources;

18 (i) Nearly 50% of Coloradans 75 years of age or older live in rural
19 areas of the state, yet only about 10% of geriatric specialists reside in or
20 serve rural areas;

21 (j) In America, 24% of veterans live in rural areas, and those
22 veterans are significantly older than veterans living in urban areas, are
23 likely to have complex care needs and multiple chronic conditions, and
24 have far less access to geriatric care than their urban counterparts;

25 (k) Older adults who are healthy or have minimal health issues are
26 inclined to live at home and age in place rather than in a nursing home or
27 other group living situation, and medical experts advise that people age

1 better at home;

2 (l) Older adults who are able to live at home instead of in a group
3 setting are less susceptible to the spread of disease, such as COVID-19,
4 thus prolonging their lives and avoiding lengthy hospital stays; and

5 (m) It is critical for the state to take specific, targeted action to
6 increase the number of geriatric specialists providing geriatric care to the
7 growing older adult populations in rural and other provider shortage areas
8 of the state by allowing geriatric advanced practice providers to
9 participate in the state's loan repayment program through which providers
10 who commit to providing care in shortage areas of the state for specified
11 periods receive education loan repayment assistance.

12 **SECTION 2.** In Colorado Revised Statutes, 25-1.5-501, **amend**
13 (1) and (2) as follows:

14 **25-1.5-501. Legislative declaration.** (1) The general assembly
15 hereby finds that there are areas of Colorado that suffer from a lack of
16 health-care professionals, GERIATRIC ADVANCED PRACTICE PROVIDERS, or
17 behavioral health-care providers to serve, and a lack of nursing or other
18 health-care professional faculty to train health-care professionals to meet,
19 the medical and behavioral health-care needs of communities. The
20 general assembly further finds that the state needs to implement
21 incentives to encourage health-care professionals, GERIATRIC ADVANCED
22 PRACTICE PROVIDERS, and behavioral health-care providers to practice in
23 these underserved areas and to encourage nursing faculty and other
24 health-care professional faculty to teach health-care professionals.

25 (2) It is therefore the intent of the general assembly in enacting
26 this part 5 to create a state health service corps program that uses state
27 money, federal money, when permissible, and contributions from

1 communities and private sources to help repay the outstanding education
2 loans that many health-care professionals, GERIATRIC ADVANCED
3 PRACTICE PROVIDERS, behavioral health-care providers, candidates for
4 licensure, nursing faculty, and health-care professional faculty hold. In
5 exchange for repayment of loans incurred for the purpose of obtaining
6 education in their chosen health care, GERIATRIC CARE, and behavioral
7 health-care professions, the health-care professionals, GERIATRIC
8 ADVANCED PRACTICE PROVIDERS, behavioral health-care providers, and
9 candidates for licensure will commit to provide health care, GERIATRIC
10 CARE, or behavioral health-care services, as applicable, in communities
11 with underserved health care, GERIATRIC CARE, or behavioral health-care
12 needs throughout the state, and the nursing and health-care professional
13 faculty will commit to provide a specified period of service in a qualified
14 faculty position.

15 **SECTION 3.** In Colorado Revised Statutes, 25-1.5-502, **amend**
16 (1) and (13); and **add** (1.2), (4.3), (4.5), and (8.5) as follows:

17 **25-1.5-502. Definitions.** As used in this part 5, unless the context
18 otherwise requires:

19 (1) ~~"Advisory council" means the Colorado health service corps~~
20 ~~advisory council created pursuant to section 25-1.5-504~~ "ADVANCED
21 PRACTICE PROVIDER" MEANS AN ADVANCED PRACTICE REGISTERED NURSE,
22 AS DEFINED IN SECTION 12-255-104 (1), OR A PHYSICIAN ASSISTANT
23 LICENSED PURSUANT TO ARTICLE 240 OF TITLE 12.

24 (1.2) "ADVISORY COUNCIL" MEANS THE COLORADO HEALTH
25 SERVICE CORPS ADVISORY COUNCIL CREATED PURSUANT TO SECTION
26 25-1.5-504.

27 (4.3) "GERIATRIC ADVANCED PRACTICE PROVIDER" MEANS AN

1 ADVANCED PRACTICE PROVIDER WHO SATISFIES ONE OF THE FOLLOWING:

2 (a) HAS COMPLETED A FORMAL POSTGRADUATE GERIATRICS
3 TRAINING PROGRAM;

4 (b) HAS COMPLETED:

5 (I) FORMAL GERIATRICS TRAINING WITHIN THE ADVANCED
6 PRACTICE PROVIDER TRAINING PROGRAM, WHICH INCLUDES DIDACTIC
7 TEACHING OR TRAINING ABOUT GERIATRIC SYNDROMES AND THE
8 IMPORTANCE OF PHYSICAL AND COGNITIVE FUNCTION IN THE CARE OF
9 OLDER ADULTS; AND

10 (II) POSTGRADUATE CLINICAL EXPERIENCE WITH AN EMPHASIS ON
11 TIME SPENT PROVIDING GERIATRIC CARE; OR

12 (c) HAS COMPLETED GERIATRIC TRACK CLINICAL EXPERIENCE
13 WITHIN THE ADVANCED PRACTICE PROVIDER TRAINING PROGRAM.

14 (4.5) "GERIATRIC CARE" MEANS HEALTH CARE THAT IS PROVIDED
15 TO OLDER ADULTS, INCLUDING CARE PROVIDED IN OUTPATIENT,
16 POST-ACUTE, OR HOME-BASED SETTINGS, THAT FOCUSES ON IDENTIFYING
17 AND MANAGING GERIATRIC SYNDROMES AND THE IMPORTANCE OF THE
18 OLDER ADULT'S PHYSICAL AND COGNITIVE FUNCTIONAL STATUS.
19 "GERIATRIC CARE" DOES NOT INCLUDE HOSPICE-ONLY CARE.

20 (8.5) "OLDER ADULT" MEANS AN INDIVIDUAL WHO IS AT LEAST
21 SIXTY-FIVE YEARS OF AGE.

22 (13) "State-designated health professional shortage area" means
23 an area of the state designated by the primary care office, in accordance
24 with state-specific methodologies established by the state board by rule
25 pursuant to section 25-1.5-404 (1)(a), as experiencing a shortage of
26 health-care professionals, GERIATRIC ADVANCED PRACTICE PROVIDERS, or
27 behavioral health-care providers.

1 **SECTION 4.** In Colorado Revised Statutes, 25-1.5-503, **amend**
2 (1)(a)(I)(B), (1)(a)(I)(C), (1)(a)(II), (1)(b), (1)(c), (2), and (6); and **add**
3 (1)(a)(I)(D), (1)(d)(IV), and (5)(c) as follows:

4 **25-1.5-503. Colorado health service corps - program - creation**
5 **- conditions.** (1) (a) (I) The primary care office shall maintain and
6 administer, subject to available appropriations, the Colorado health
7 service corps. Subject to available appropriations, the Colorado health
8 service corps shall provide loan repayment for certain eligible:

9 (B) Nursing faculty MEMBERS or health-care professional faculty
10 members in qualified faculty positions; ~~and~~

11 (C) Behavioral health-care providers and candidates for licensure
12 who provide behavioral health-care services; AND

13 (D) GERIATRIC ADVANCED PRACTICE PROVIDERS.

14 (II) Under the Colorado health service corps, subject to the
15 limitations specified in subsection (2) of this section, upon entering into
16 a loan contract the state may either:

17 (A) Make payments on the education loans of the health-care
18 professional, behavioral health-care provider, candidate for licensure,
19 GERIATRIC ADVANCED PRACTICE PROVIDER, nursing faculty member, or
20 health-care professional faculty member; or

21 (B) Agree to make an advance payment in a lump sum of all or
22 part of the principal, interest, and related expenses of the education loans
23 of health-care professionals, behavioral health-care providers, candidates
24 for licensure, GERIATRIC ADVANCED PRACTICE PROVIDERS, nursing faculty
25 members, or health-care professional faculty members, subject to the
26 limitations specified in subsection (2) of this section.

27

1 (b) Repayment of loans under the Colorado health service corps
2 may be made using money in the Colorado health service corps fund. The
3 primary care office is authorized to receive and expend gifts, grants, and
4 donations or money appropriated by the general assembly for the purpose
5 of implementing the Colorado health service corps. In administering the
6 Colorado health service corps, the primary care office shall collaborate
7 with appropriate partners as needed to maximize the federal money
8 available to the state for state loan repayment programs through the
9 federal department of health and human services. The selection of
10 health-care professionals, behavioral health-care providers, candidates for
11 licensure, GERIATRIC ADVANCED PRACTICE PROVIDERS, nursing faculty
12 members, and health-care professional faculty members for participation
13 in the Colorado health service corps is exempt from the competitive
14 bidding requirements of the "Procurement Code", articles 101 to 112 of
15 title 24.

16 (c) The following providers are not eligible for loan repayment
17 through the Colorado health service corps:

18 (I) Health-care professionals who are not practicing in primary
19 care specialties or providing primary health services; ~~and~~

20 (II) Behavioral health-care providers and candidates for licensure
21 who are not providing behavioral health-care services; AND

22 (III) GERIATRIC ADVANCED PRACTICE PROVIDERS WHO ARE NOT
23 PROVIDING GERIATRIC CARE.

24 (d) (IV) AS A CONDITION OF RECEIVING A LOAN REPAYMENT
25 THROUGH THE COLORADO HEALTH SERVICE CORPS, A GERIATRIC
26 ADVANCED PRACTICE PROVIDER MUST ENTER INTO A CONTRACT PURSUANT
27 TO WHICH THE GERIATRIC ADVANCED PRACTICE PROVIDER AGREES TO

1 PROVIDE GERIATRIC CARE FOR AT LEAST TWO YEARS IN A COMMUNITY
2 THAT IS LOCATED IN A HEALTH PROFESSIONAL SHORTAGE AREA. THE
3 GERIATRIC ADVANCED PRACTICE PROVIDER, THE PRIMARY CARE OFFICE,
4 AND THE COMMUNITY EMPLOYER WITH WHICH THE GERIATRIC ADVANCED
5 PRACTICE PROVIDER IS PRACTICING MUST BE PARTIES TO THE CONTRACT.

6 (2) Subject to available appropriations, the primary care office
7 shall annually select health-care professionals, behavioral health-care
8 providers, candidates for licensure, GERIATRIC ADVANCED PRACTICE
9 PROVIDERS, nursing faculty members, and health-care professional
10 members from the list provided by the advisory council pursuant to
11 section 25-1.5-504 (5)(a) to participate in the Colorado health service
12 corps.

13 (5)(c) FOR A GERIATRIC ADVANCED PRACTICE PROVIDER APPLYING
14 TO PARTICIPATE IN THE COLORADO HEALTH SERVICE CORPS, THE
15 ADVISORY COUNCIL SHALL DEVELOP THE CRITERIA TO BE USED, AND SHALL
16 APPLY THOSE CRITERIA, IN SELECTING GERIATRIC ADVANCED PRACTICE
17 PROVIDER APPLICANTS AND SHALL CONSIDER WHETHER THE APPLICANT IS
18 WILLING TO SERVE AS A PRECEPTOR FOR ADVANCED PRACTICE PROVIDERS
19 AND OTHER PROVIDERS SEEKING TRAINING IN GERIATRIC CARE.

20 (6) A contract for loan repayment entered into pursuant to this part
21 5 must not include terms that are more favorable to health-care
22 professionals, behavioral health-care providers, or candidates for
23 licensure, OR GERIATRIC ADVANCED PRACTICE PROVIDERS than the most
24 favorable terms that the secretary of the federal department of health and
25 human services is authorized to grant under the national health services
26 corps program. In addition, each contract must include penalties for
27 breach of contract that are at least as stringent as those available to the

1 secretary of the federal department of health and human services. In the
2 event of a breach of contract for a loan repayment entered into pursuant
3 to this part 5, the primary care office shall enforce the contract and collect
4 any damages or other penalties owed.

5 **SECTION 5.** In Colorado Revised Statutes, 25-1.5-504, **amend**
6 (2) introductory portion, (2)(n), (2)(o), and (5)(a); and **add** (2)(p) as
7 follows:

8 **25-1.5-504. Colorado health service corps advisory council -**
9 **creation - membership - duties.** (2) The advisory council consists of
10 ~~fifteen~~ SIXTEEN members appointed by the governor as provided in this
11 subsection (2). In appointing members of the advisory council, the
12 governor shall ensure that the advisory council includes at least one
13 representative from each of the following organizations OR PRACTICE
14 AREAS:

15 (n) A membership organization representing substance use
16 disorder service providers; ~~and~~

17 (o) A licensed or certified addiction counselor who has experience
18 in rural health, safety net clinics, or health equity; AND

19 (p) A PHYSICIAN WHO PROVIDES GERIATRIC CARE OR A GERIATRIC
20 ADVANCED PRACTICE PROVIDER.

21 (5) (a) The advisory council shall review applications received
22 from health-care professionals, behavioral health-care providers,
23 candidates for licensure, GERIATRIC ADVANCED PRACTICE PROVIDERS,
24 nursing faculty members, and health-care professional faculty members
25 to participate in the Colorado health service corps. Subject to available
26 appropriations and federal requirements concerning eligibility for federal
27 loan repayment matching funds, the advisory council shall annually select

1 health-care professionals, behavioral health-care providers, candidates for
2 licensure, GERIATRIC ADVANCED PRACTICE PROVIDERS, nursing faculty
3 members, and health-care professional faculty members to participate in
4 the Colorado health service corps and shall forward its list of selected
5 participants to the primary care office.

6 **SECTION 6.** In Colorado Revised Statutes, 25-1.5-505, **amend**
7 (1) introductory portion, (1)(a), and (1)(d) as follows:

8 **25-1.5-505. Advisory council - report.** (1) On or before
9 December 1, 2011, and on or before December 1 every two years
10 thereafter, the primary care office, with assistance from the advisory
11 council, shall submit to the governor, the health and human services
12 committee of the senate, the ~~committees on~~ health AND insurance ~~and~~
13 ~~environment~~ and ~~on~~ public AND BEHAVIORAL health ~~care~~ and human
14 services COMMITTEES of the house of representatives, or any successor
15 committees, a report that includes, at a minimum, the following
16 information:

17 (a) A description of the health-care professionals, behavioral
18 health-care providers, candidates for licensure, GERIATRIC ADVANCED
19 PRACTICE PROVIDERS, nursing faculty members, and health-care
20 professional faculty members participating in the Colorado health service
21 corps program and the scholarship program;

22 (d) An analysis of the effects of the Colorado health service corps
23 program and the scholarship program on addressing the health care,
24 GERIATRIC CARE, and behavioral health-care needs of communities in
25 Colorado;

26

==

27 **SECTION 7.** In Colorado Revised Statutes, 25-1.5-404, **amend**

1 (1)(a) as follows:

2 **25-1.5-404. Primary care office - powers and duties - rules.**

3 (1) The primary care office has, at a minimum, the following powers and
4 duties:

5 (a) To assess the health-care PROFESSIONAL, GERIATRIC
6 ADVANCED PRACTICE PROVIDER, and behavioral health-care professional
7 needs of areas throughout the state and create and administer
8 state-designated health professional shortage areas in accordance with
9 state board rules adopted under this subsection (1)(a) establishing
10 state-specific methodologies for designating areas experiencing a
11 shortage of health-care professionals, GERIATRIC ADVANCED PRACTICE
12 PROVIDERS, or behavioral health-care providers. The primary care office
13 shall coordinate with the department of health care policy and financing
14 in developing the health professional shortage area designation
15 methodologies and in drafting rules under this subsection (1)(a).

16 **SECTION 8. Appropriation.** For the 2021-22 state fiscal year,
17 \$400,000 is appropriated to the Colorado health service corps fund
18 created in section 25-1.5-506 (1), C.R.S. This appropriation is from the
19 General Fund. The department of public health and environment is
20 responsible for the accounting related to this appropriation.

21 **SECTION 9. Act subject to petition - effective date.** This act
22 takes effect at 12:01 a.m. on the day following the expiration of the
23 ninety-day period after final adjournment of the general assembly; except
24 that, if a referendum petition is filed pursuant to section 1 (3) of article V
25 of the state constitution against this act or an item, section, or part of this
26 act within such period, then the act, item, section, or part will not take
27 effect unless approved by the people at the general election to be held in

- 1 November 2022 and, in such case, will take effect on the date of the
- 2 official declaration of the vote thereon by the governor.