

**First Regular Session  
Seventy-third General Assembly  
STATE OF COLORADO**

**PREAMENDED**

*This Unofficial Version Includes Committee  
Amendments Not Yet Adopted on Second Reading*

LLS NO. 21-0576.03 Kristen Forrester x4217

**SENATE BILL 21-181**

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**SENATE SPONSORSHIP**

**Fields and Coram,**

**HOUSE SPONSORSHIP**

**Herod and Caraveo,**

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**Senate Committees**

Health & Human Services  
Appropriations

**House Committees**

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**A BILL FOR AN ACT**

101      **CONCERNING STATE AGENCIES ADDRESSING HEALTH DISPARITIES IN**  
102              **COLORADO, AND, IN CONNECTION THEREWITH, MAKING AN**  
103              **APPROPRIATION.**

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**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 renames the existing "health disparities grant program" to the "health disparities and community grant program" (program) and expands the program to authorize the office of health equity (office) to:

- Award grants from money currently transferred from the prevention, early detection, and treatment fund to the health

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.

disparities grant program fund (fund) for the purpose of positively affecting social determinants of health to reduce the risk of future disease and exacerbating health disparities in underrepresented populations; and

- Award grants from any additional money appropriated by the general assembly to the fund to community organizations to reduce health disparities in underrepresented communities through policy and systems changes regarding the social determinants of health.

On or before January 1, 2022, and continuing every 2 years thereafter, the office is required to issue a report concerning health disparities in Colorado by race and ethnicity that includes an assessment of the impact of social determinants of health on health disparities and recommended strategies to begin to address such inequities with the collaboration of the health equity commission and other stakeholders.

On or before July 1, 2022, the office is required to facilitate a state agency work group to develop an equity strategic plan. Specific state agencies are required to participate in the state agency work group to ensure coordination in equity-related work across state agencies to address social determinants of health in each agency's respective area.

The bill adds additional state agency executive directors to the health equity commission.

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

2 **SECTION 1.** In Colorado Revised Statutes, 24-22-117, **amend**  
3 (2)(d)(III) and (2)(f)(I) as follows:

4 **24-22-117. Tobacco tax cash fund - accounts - creation -**  
5 **legislative declaration.** (2) There are hereby created in the state treasury  
6 the following funds:

7 (d) (III) For fiscal year 2005-06, and each fiscal year thereafter,  
8 fifteen percent of the ~~moneys~~ MONEY transferred to the prevention, early  
9 detection, and treatment fund shall be transferred to the health disparities  
10 grant program fund created in ~~paragraph (f) of this subsection (2)~~  
11 SUBSECTION (2)(f) OF THIS SECTION for the health disparities AND  
12 COMMUNITY grant program in part 22 of article 4 of title 25. ~~C.R.S.~~

13 (f) (I) The health disparities grant program fund to be

1 administered by the department of public health and environment.  
2 ~~Moneys shall~~ MONEY MUST be transferred to the health disparities grant  
3 program fund as described in ~~subparagraph (H) of paragraph (d) of this~~  
4 ~~subsection (2)~~ SUBSECTION (2)(d)(III) OF THIS SECTION. THE HEALTH  
5 DISPARITIES GRANT PROGRAM FUND ALSO CONSISTS OF ANY OTHER MONEY  
6 APPROPRIATED TO THE HEALTH DISPARITIES GRANT PROGRAM FUND BY  
7 THE GENERAL ASSEMBLY. All interest and income derived from the  
8 deposit and investment of ~~moneys~~ MONEY in the health disparities grant  
9 program fund ~~shall~~ MUST be credited to the health disparities grant  
10 program fund. ~~except that all interest and income derived from the deposit~~  
11 ~~and investment of moneys in the health disparities grant program fund~~  
12 ~~during the 2008-09, 2009-10, 2010-11, and 2011-12 fiscal years shall be~~  
13 ~~credited to the general fund.~~ Any unexpended or unencumbered ~~moneys~~  
14 MONEY remaining in the health disparities grant program fund at the end  
15 of the fiscal year ~~shall~~ MUST remain in the fund and shall not be credited  
16 to the general fund or any other fund. The ~~moneys~~ MONEY in the health  
17 disparities grant program fund ~~shall~~ MUST be annually appropriated by the  
18 general assembly to the department of public health and environment for  
19 allocation by the department of public health and environment consistent  
20 with the provisions of ~~paragraph (d) of this subsection (2)~~ SUBSECTION  
21 (2)(d) OF THIS SECTION.

22 **SECTION 2.** In Colorado Revised Statutes, 25-4-2201, **amend**  
23 (2) as follows:

24 **25-4-2201. Legislative declaration.** (2) Therefore, the general  
25 assembly hereby declares that it is in the best interests of the state to  
26 establish a health disparities AND COMMUNITY grant program to provide  
27 prevention, early detection, and treatment of cancer and cardiovascular

1 and pulmonary diseases to underrepresented populations.

2 **SECTION 3.** In Colorado Revised Statutes, 25-4-2202, **add** (3.3)  
3 as follows:

4 **25-4-2202. Definitions.** As used in this part 22, unless the context  
5 otherwise requires:

6 (3.3) "EQUITY STRATEGIC PLAN" MEANS A STRATEGIC PLAN THAT  
7 IDENTIFIES FOR CERTAIN STATE AGENCIES THE PRIORITIES, OBSTACLES,  
8 GOALS, AND TIMELINES NECESSARY TO ADDRESS IDENTIFIED HEALTH  
9 DISPARITIES IN EACH AGENCY'S RESPECTIVE AREA OF WORK AND  
10 INFLUENCE.

11 **SECTION 4.** In Colorado Revised Statutes, 25-4-2203, **amend**  
12 (1), (2) introductory portion, (2)(b), and (3) as follows:

13 **25-4-2203. Health disparities and community grant program**  
14 **- rules.** (1) There is hereby created in the department the health  
15 disparities AND COMMUNITY grant program, referred to in this section as  
16 the "grant program", to provide financial support for statewide initiatives  
17 that address prevention, early detection, and treatment of cancer and  
18 cardiovascular and pulmonary diseases in underrepresented populations;  
19 AND TO POSITIVELY AFFECT SOCIAL DETERMINANTS OF HEALTH TO REDUCE  
20 THE RISK OF FUTURE DISEASE AND EXACERBATING HEALTH DISPARITIES IN  
21 UNDERREPRESENTED POPULATIONS. The office shall administer the grant  
22 program. The state board shall award grants to selected entities from  
23 ~~moneys~~ MONEY transferred to the health disparities grant program fund  
24 created in section 24-22-117 (2)(f). ~~C.R.S.~~

25 (2) The state board shall adopt rules that specify ~~but are not~~  
26 ~~necessarily limited to~~, the following:

27 (b) Grant application contents, including: ~~but not limited to~~

1 (I) FOR MONEY ALLOCATED TO THE HEALTH DISPARITIES GRANT  
2 PROGRAM FUND PURSUANT TO SECTION 24-22-117 (2)(d)(III), how the  
3 program meets at least one of the program criteria specified in section  
4 25-20.5-302 (1), WHICH MAY INCLUDE POPULATION-BASED PREVENTION  
5 WORK FOCUSED ON INFLUENCING SOCIAL DETERMINANTS OF HEALTH TO  
6 ADVANCE HEALTH EQUITY FOR UNDERREPRESENTED POPULATIONS; AND

7 (II) FOR ANY ADDITIONAL MONEY APPROPRIATED BY THE GENERAL  
8 ASSEMBLY TO THE HEALTH DISPARITIES GRANT PROGRAM FUND CREATED  
9 IN SECTION 24-22-117 (2)(f) THAT IS NOT ALLOCATED FROM THE  
10 PREVENTION, EARLY DETECTION, AND TREATMENT FUND PURSUANT TO  
11 SECTION 24-22-117 (2)(d)(III), THE CRITERIA THAT MUST BE MET FOR A  
12 COMMUNITY ORGANIZATION APPLICANT TO RECEIVE GRANT MONEY TO  
13 REDUCE HEALTH DISPARITIES IN UNDERREPRESENTED COMMUNITIES  
14 THROUGH POLICY AND SYSTEMS CHANGES REGARDING THE SOCIAL  
15 DETERMINANTS OF HEALTH. THE CRITERIA MAY INCLUDE SPECIFICATIONS  
16 CONCERNING HOW COMMUNITY ORGANIZATIONS PLAN TO ACHIEVE  
17 HEALTH EQUITY THROUGH STRATEGIC PLANNING, BUILDING THE CAPACITY  
18 OF STAFF AND VOLUNTEERS, TECHNICAL TRAINING AND ASSISTANCE  
19 WITHIN THE COMMUNITY ORGANIZATIONS, AND THE EVALUATION OF THE  
20 COMMUNITY ORGANIZATION'S IMPACT ON THE COMMUNITY.

21 (3) The commission shall appoint a review committee to review  
22 the applications received pursuant to this section and make  
23 recommendations to the commission regarding the entities that may  
24 receive grants and the amounts of the grants. The commission shall  
25 finalize the recommendations for funding and provide them to the state  
26 board. Within thirty days after receiving the commission's  
27 recommendations, the state board shall award grants to the selected

1 entities, specifying the amount and duration of each award. ~~A grant~~  
2 ~~awarded pursuant to this section shall not exceed three years without~~  
3 ~~renewal.~~

4 **SECTION 5.** In Colorado Revised Statutes, 25-4-2205, **amend**  
5 (2)(a); and **add** (2.5) as follows:

6 **25-4-2205. Powers and duties of the office of health equity.**

7 (2) The office has the following powers, duties, and functions:

8 (a) Administering and coordinating the health disparities AND  
9 COMMUNITY grant program created in section 25-4-2203;

10 (2.5) (a) ON OR BEFORE JANUARY 1, 2022, AND CONTINUING  
11 EVERY TWO YEARS THEREAFTER, THE OFFICE SHALL CONDUCT AN  
12 ASSESSMENT AND PUBLISH A REPORT CONCERNING HEALTH DISPARITIES  
13 AND INEQUITIES IN COLORADO \_\_ THAT INCLUDES AN ASSESSMENT OF THE  
14 IMPACT OF SOCIAL DETERMINANTS OF HEALTH ON HEALTH DISPARITIES  
15 AND INEQUITIES AND RECOMMENDED STRATEGIES TO BEGIN TO ADDRESS  
16 SUCH INEQUITIES. THE OFFICE SHALL COLLABORATE WITH THE  
17 COMMISSION, COMMUNITY PARTNERS WORKING ON HEALTH EQUITY  
18 ISSUES, LOCAL PUBLIC HEALTH AGENCIES, STAKEHOLDERS FROM AFFECTED  
19 COMMUNITIES, DATA ORGANIZATIONS, AND OTHER STATE AND LOCAL  
20 PARTNERS IN THE CREATION OF THE REPORT. IN ADDITION TO PROVIDING  
21 INFORMATION TO THE PUBLIC ABOUT THE IMPACT OF HEALTH DISPARITIES  
22 AND INEQUITIES ON COLORADANS, EACH STATE AGENCY THAT HAS  
23 REPRESENTATION ON THE COMMISSION SHALL USE THE REPORT IN THEIR  
24 PLAN AS DESCRIBED IN SUBSECTION (2.5)(b)(I) OF THIS SECTION. IN EACH  
25 REPORT AFTER THE FIRST PUBLISHED REPORT, THE OFFICE SHALL REPORT  
26 THE PROGRESS MADE BY THE COMMISSION PURSUANT TO SUBSECTION  
27 (2.5)(b) OF THIS SECTION TO ADDRESS THE SOCIAL DETERMINANTS OF

1 HEALTH AND THE STRATEGIES USED TO ADDRESS HEALTH DISPARITIES AND  
2 INEQUITIES.

3 (b) WITHIN SIX MONTHS AFTER THE PUBLICATION OF THE FIRST  
4 REPORT REQUIRED IN SUBSECTION (2.5)(a) OF THIS SECTION:

5 (I) THE GOVERNOR SHALL CONVENE THE COMMISSION TO CONDUCT  
6 A STRATEGIC PLANNING PROCESS AND DEVELOP AN EQUITY STRATEGIC  
7 PLAN, TO RESPOND TO THE REPORT, AND TO ENSURE THAT THERE IS  
8 COORDINATION IN EQUITY-RELATED WORK ACROSS STATE AGENCIES TO  
9 ADDRESS THE SOCIAL DETERMINANTS OF HEALTH IN EACH AGENCY'S  
10 RESPECTIVE AREAS. THE STRATEGIC PLANNING PROCESS MUST INCLUDE  
11 INPUT FROM COMMUNITY STAKEHOLDERS AND POLICYMAKERS. THE  
12 OFFICE MAY COLLABORATE WITH THE HEALTH EQUITY AND COMMUNITY  
13 GRANT PROGRAM CREATED IN SECTION 25-4-2203 TO ADDRESS ISSUES  
14 IDENTIFIED BY THE EQUITY STRATEGIC PLAN.

15 (II) EACH MEMBER OF THE COMMISSION THAT REPRESENTS A STATE  
16 AGENCY SHALL DEVELOP A PLAN TO ADDRESS THE SOCIAL DETERMINANTS  
17 OF HEALTH RELEVANT TO THAT STATE AGENCY AS THEY AFFECT HEALTH  
18 DISPARITIES AND INEQUITIES. EACH STATE AGENCY SHALL DEDICATE UP  
19 TO TWENTY HOURS OF STAFF TIME TO THE DEVELOPMENT AND  
20 IMPLEMENTATION OF THE EQUITY STRATEGIC PLAN.

21 **SECTION 6.** In Colorado Revised Statutes, 25-4-2206, **amend**  
22 (2)(a) introductory portion, (2)(a)(V), (2)(a)(VI), (3)(b)(II), and (3)(d);  
23 and **add** (2)(a)(VII), (2)(a)(VIII), (2)(a)(IX), (2)(a)(X), (2)(a)(XI),  
24 (2)(a)(XII), and (2)(a)(XIII) as follows:

25 **25-4-2206. Health equity commission - creation - repeal.**  
26 (2) (a) The commission consists of the following ~~fifteen~~ TWENTY-TWO  
27 members, who are as follows:

1 (V) The executive director of the department of human services,  
2 or ~~his or her~~ THE EXECUTIVE DIRECTOR'S designee; and

3 (VI) The executive director of the department of health care  
4 policy and financing, or ~~his or her~~ THE EXECUTIVE DIRECTOR'S designee;

5 (VII) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF LABOR  
6 AND EMPLOYMENT, OR THE EXECUTIVE DIRECTOR'S DESIGNEE;

7 (VIII) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF LOCAL  
8 AFFAIRS, OR THE EXECUTIVE DIRECTOR'S DESIGNEE;

9 (IX) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF  
10 TRANSPORTATION, OR THE EXECUTIVE DIRECTOR'S DESIGNEE;

11 (X) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF PUBLIC  
12 SAFETY, OR THE EXECUTIVE DIRECTOR'S DESIGNEE;     

13 (XI) THE COMMISSIONER OF EDUCATION OF THE DEPARTMENT OF  
14 EDUCATION, OR THE COMMISSIONER'S DESIGNEE;

15 (XII) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF  
16 CORRECTIONS, OR THE EXECUTIVE DIRECTOR'S DESIGNEE; AND

17 (XIII) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF HIGHER  
18 EDUCATION, OR THE EXECUTIVE DIRECTOR'S DESIGNEE.

19 (3) The commission has the following powers and duties:

20 (b) Advising the department through the office on:

21 (II) Aligning the department's health equity efforts and the health  
22 disparities AND COMMUNITY grant program created in section 25-4-2203;

23 (d) Making recommendations to the office and the department on  
24 the health disparities AND COMMUNITY grant program created in section  
25 25-4-2203, regarding financial support for local and statewide initiatives  
26 that address prevention, early detection, needs assessment, and treatment  
27 of cancer, cardiovascular disease, including diabetes, and pulmonary



1 disease in minority populations.

2 **SECTION 7.** In Colorado Revised Statutes, **amend** 25-20.5-305  
3 as follows:

4 **25-20.5-305. Evaluation.** Commencing with the 2006-07 fiscal  
5 year, and each fiscal year thereafter, the state board shall select a grant  
6 recipient to evaluate the effectiveness of the program and the health  
7 disparities AND COMMUNITY grant program established pursuant to part  
8 22 of article 4 of this ~~title~~ TITLE 25. Costs for the evaluation shall be  
9 adequately funded from the amount annually appropriated by the general  
10 assembly to the division from the prevention, early detection, and  
11 treatment fund.

12 **SECTION 8. Appropriation.** For the 2021-22 state fiscal year,  
13 \$51,783 is appropriated to the department of public health and  
14 environment for use by the office of health equity. This appropriation is  
15 from the health disparities grant program fund created in section  
16 24-22-117 (2)(f)(I), C.R.S., and is based on an assumption that the office  
17 will require an additional 0.5 FTE. To implement this act, the office may  
18 use this appropriation for program costs.

19 **SECTION 9. Safety clause.** The general assembly hereby finds,  
20 determines, and declares that this act is necessary for the immediate  
21 preservation of the public peace, health, or safety.