

CHAPTER 42

HUMAN SERVICES - SOCIAL SERVICES

HOUSE BILL 01-1080

BY REPRESENTATIVE(S) Borodkin, Daniel, Hodge, Boyd, Chavez, Coleman, Garcia, Groff, Grossman, Jahn, Johnson, Kester, Mace, Madden, Marshall, Miller, Plant, Ragsdale, Romanoff, Sanchez, Tapia, Tochtrop, Veiga, Vigil, and Williams S.; also SENATOR(S) Hagedorn, Hanna, and Linkhart.

AN ACT

CONCERNING A STUDY BY THE COLORADO HEALTH CARE TASK FORCE OF INNOVATIVE HOUSING OPTIONS FOR OLDER PEOPLE WHO CAN NO LONGER LIVE INDEPENDENTLY IN THEIR COMMUNITIES.

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

SECTION 1. 26-15-107 (3), Colorado Revised Statutes, is amended to read:

26-15-107. Colorado health care task force - legislative declaration - creation - duties - repeal. (3) **Duties.** (a) In carrying out its duties and functions under this section, the task force shall consider, but need not be limited to, the following:

(I) Emerging trends in Colorado health care and their impacts on consumers, including, but not limited to:

- (A) Changes in relationships among health care providers, patients, and payors;
- (B) Restrictions in health care options available to consumers;
- (C) Professional liability issues arising from such restrictions;
- (D) Medical and patient record confidentiality;
- (E) Health care work force requirements; and
- (F) Home care in the continuum of care.

(II) The effect of recent shifts in the way health care is delivered and paid for;

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

(III) The ability of consumers to obtain and keep adequate, affordable health insurance coverage, including coverage for catastrophic illnesses;

(IV) The effect of managed care on the ability of consumers to obtain timely access to quality care;

(V) The operation of the program for the medically indigent in order to give guidance and direction to the state department in the development and operation of such program;

(VI) The future trends for health care coverage rates for employees and employers;

(VII) The role of public health programs and services;

(VIII) Social and financial costs and benefits of mandated health care coverage;
and

(IX) Costs and benefits of providing preventive care and early treatment for people with chronic illnesses who may eventually need long-term care; AND

(X) INNOVATIVE OPTIONS FOR HOUSING, HOME AND COMMUNITY-BASED SERVICES, AND ASSISTED LIVING SERVICES FOR OLDER PEOPLE WHO CAN NO LONGER LIVE INDEPENDENTLY IN THEIR COMMUNITIES AND POSSIBLE FUNDING SOURCES FOR THESE LEVELS OF CARE. IN ADDITION, THE HEALTH CARE TASK FORCE SHALL CONSIDER THE IMPLEMENTATION OF BOTH SHORT AND LONG RANGE RECOMMENDATIONS ON RATE DISPARITY AND SHORTFALLS WITHIN LONG-TERM CARE MADE BY THE TASK FORCE CREATED PURSUANT TO FOOTNOTE 50a OF HOUSE BILL 00-1451.

(b) The task force shall make such recommendations as it deems necessary to the general assembly concerning matters studied under this section. Legislation recommended by the task force shall be treated as legislation recommended by an interim legislative committee for purposes of any introduction deadlines or bill limitations imposed by the joint rules of the general assembly.

(c) THE TASK FORCE SHALL STUDY AND MAKE RECOMMENDATIONS TO THE GENERAL ASSEMBLY FOR CONSIDERATION DURING THE 2002 REGULAR LEGISLATIVE SESSION, IN THE FORM OF LEGISLATION IF NECESSARY, REGARDING THE ISSUES PRESENTED IN SUBPARAGRAPH (X) OF PARAGRAPH (a) OF THIS SUBSECTION (3).

SECTION 2. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Approved: March 20, 2001