

Second Regular Session
Seventy-fifth General Assembly
STATE OF COLORADO

ENGROSSED

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

LLS NO. 26-0232.01 Josh Schultz x5486

HOUSE BILL 26-1069

HOUSE SPONSORSHIP

Feret and Stewart K.,

SENATE SPONSORSHIP

Mullica,

House Committees

Health & Human Services
Appropriations

Senate Committees

A BILL FOR AN ACT

101 **CONCERNING INCREASING THE AVAILABILITY OF EMERGENCY**
102 **MEDICAL SERVICES, AND, IN CONNECTION THEREWITH, MAKING**
103 **AND REDUCING 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 clarifies that "emergency services" includes transportation of an individual to an appropriate location other than a hospital or community integrated health-care service agency (agency).

The use of telemedicine when an insured person has encountered an ambulance service or agency to prevent the need to transport the

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

HOUSE
Amended 2nd Reading
March 6, 2026

person to an emergency department is included in the definition of "emergency services", which services are required to be made available to insured persons 24 hours per day, 7 days per week.

The bill defines "first responder" to include:

- A peace officer;
- A firefighter;
- A volunteer firefighter;
- An emergency medical service provider; or
- A mental health professional who responds in a professional capacity to a justifiable medical emergency.

The bill requires the executive director of the department of public health and environment to adopt rules by June 1, 2027, authorizing an emergency medical service provider with a community paramedic endorsement who is employed by, volunteering for, or contracting with a licensed agency to provide for the inventory, compliance, and administration of, or to directly administer, medications, procedures, or diagnostic testing.

Beginning January 1, 2027, the bill requires the department of health care policy and financing to reimburse the following entities under the "Colorado Medical Assistance Act":

- An ambulance service or an agency for transportation by an ambulance or other vehicle to a hospital or other destination as deemed appropriate by the ambulance service's or agency's medical director;
- An ambulance service or an agency for treatment on the scene of a medical emergency, which treatment does not result in transportation; and
- A qualified provider, an ambulance service, or an agency for evaluation by telemedicine of a person being treated by an ambulance service or an agency for the purpose of preventing the need to transport the person to a hospital.

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

2

3 **SECTION 1.** In Colorado Revised Statutes, 10-16-704, **amend**
4 (19)(e)(I) and (19)(e)(II) introductory portion; and **add** (19)(1.5) as
5 follows:

6 **10-16-704. Network adequacy - required disclosures - balance**
7 **billing - rules - legislative declaration - definitions.**

1 (19) As used in this section:

2 (e) (I) "Emergency services", with respect to an emergency
3 medical condition, means:

4 (A) A medical screening examination that is within the capability
5 of the emergency department of a hospital or a freestanding emergency
6 department, as applicable, including ancillary services routinely available
7 to the emergency department, AN AMBULANCE SERVICE, AS DEFINED IN
8 SECTION 25-3.5-103 (3), OR AN AGENCY PROVIDING OUT-OF-HOSPITAL
9 SERVICES to evaluate the emergency medical condition; and

10 (B) Within the capabilities of the staff and facilities available at
11 the hospital, regardless of the department in which further examination
12 or treatment is furnished, or the freestanding emergency department, as
13 applicable, further medical examination and treatment as are required to
14 stabilize the patient to ensure, within reasonable medical probability, that
15 no material deterioration of the condition is NOT likely to result from or
16 occur during the transfer of the patient from a facility;

17 (C) THE GROUND TRANSPORTATION OF A COVERED PERSON TO AN
18 APPROPRIATE LOCATION OTHER THAN A HOSPITAL, IF THE DESTINATION IS
19 A CRISIS STABILIZATION UNIT AND THE PATIENT MEETS CLINICALLY
20 VALIDATED CRITERIA APPROVED BY THE EMERGENCY MEDICAL SERVICE
21 PROVIDER'S MEDICAL DIRECTOR FOR DIVERSION TO THE SELECTED
22 ALTERNATIVE DESTINATION. THE EMERGENCY MEDICAL SERVICE
23 PROVIDER SHALL BILL THE CARRIER FOR TRANSPORTATION OF THE
24 COVERED PERSON AT THE BASIC LIFE SUPPORT RATE; OR

25 (D) THE EXAMINATION AND TREATMENT OF A COVERED PERSON AT
26 THE SCENE OF A MEDICAL EMERGENCY OR DURING TRANSPORT FROM THE
27 SCENE OF A MEDICAL EMERGENCY BY AN AMBULANCE SERVICE, AS

1 DEFINED IN SECTION 25-3.5-103 (3), OR AN AGENCY PROVIDING
2 OUT-OF-HOSPITAL SERVICES.

3 (II) For a covered person ~~who~~ THAT is provided services described
4 in ~~subsections (19)(e)(I)(A) and (19)(e)(I)(B)~~ SUBSECTION (19)(e)(I) of
5 this section with respect to an emergency medical condition, unless each
6 of the conditions in subsection (19)(e)(III) of this section are met, the
7 term "emergency services" includes services that are:

8 (1.5) (I) "OUT-OF-HOSPITAL SERVICES" MEANS FURNISHING ANY
9 NECESSARY GOODS AND SERVICES OUTSIDE OF A HOSPITAL SETTING FOR
10 THE PURPOSE OF PREVENTING, ALLEVIATING, CURING, OR HEALING HUMAN
11 ILLNESS, A PHYSICAL DISABILITY, A PHYSICAL INJURY, OR A SUBSTANCE
12 USE DISORDER WHILE RESPONDING TO AN EMERGENCY OR OTHER
13 HEALTH-CARE CONDITION.

14 (II) "OUT-OF-HOSPITAL SERVICES" DOES NOT INCLUDE
15 PREHOSPITAL SETTING TRANSPORTS.

16 **SECTION 2.** In Colorado Revised Statutes, 24-1-119, **add** (19)
17 as follows:

18 **24-1-119. Department of public health and environment -**
19 **creation.**

20 (19) THE STATE EMERGENCY MEDICAL AND TRAUMA SERVICES
21 ADVISORY COUNCIL, CREATED IN SECTION 25-3.5-104 (1), IS A **TYPE 2**
22 ENTITY, AS DEFINED IN SECTION 24-1-105.

23 **SECTION 3.** In Colorado Revised Statutes, 25-3.5-103, **amend**
24 (8.5), (8.6), (8.7), (8.8), and (9); and **add** (9.5) as follows:

25 **25-3.5-103. Definitions.**

26 As used in this article 3.5, unless the context otherwise requires:

27 (8.5) ~~"Health information organization network" means an~~

1 ~~organization that oversees and governs the exchange of health-related~~
2 ~~information among organizations according to nationally recognized~~
3 ~~standards.~~ "FIRST RESPONDER" MEANS:

- 4 (a) A PEACE OFFICER, AS DESCRIBED IN SECTION 16-2.5-101;
- 5 (b) A FIREFIGHTER, AS DEFINED IN SECTION 29-5-203 (10);
- 6 (c) A VOLUNTEER FIREFIGHTER, AS DEFINED IN SECTION
7 31-30-1102 (9)(a);
- 8 (d) AN EMERGENCY MEDICAL SERVICE PROVIDER; AND
- 9 (e) A MENTAL HEALTH PROFESSIONAL WHO RESPONDS IN A
10 PROFESSIONAL CAPACITY TO A JUSTIFIABLE MEDICAL EMERGENCY.

11 (8.6) ~~"Justifiable medical emergency" means an underlying~~
12 ~~medical, traumatic, or psychiatric condition posing an immediate safety~~
13 ~~risk to the individual, emergency medical service provider, or public.~~
14 ~~Excited delirium, any subsequent term for excited delirium, or any acute~~
15 ~~psychiatric diagnosis not recognized in the most recent edition of the~~
16 ~~diagnostic and statistical manual of mental disorders is not a justifiable~~
17 ~~medical emergency~~ "HEALTH INFORMATION ORGANIZATION NETWORK"
18 MEANS AN ORGANIZATION THAT OVERSEES AND GOVERNS THE EXCHANGE
19 OF HEALTH-RELATED INFORMATION AMONG ORGANIZATIONS ACCORDING
20 TO NATIONALLY RECOGNIZED STANDARDS.

21 (8.7) ~~"Local licensing authority" means the governing body of a~~
22 ~~city and county or the board of county commissioners in a county in the~~
23 ~~state~~ "JUSTIFIABLE MEDICAL EMERGENCY" MEANS AN UNDERLYING
24 MEDICAL, TRAUMATIC, OR PSYCHIATRIC CONDITION POSING AN IMMEDIATE
25 SAFETY RISK TO THE INDIVIDUAL, EMERGENCY MEDICAL SERVICE
26 PROVIDER, OR PUBLIC. EXCITED DELIRIUM, ANY SUBSEQUENT TERM FOR
27 EXCITED DELIRIUM, OR ANY ACUTE PSYCHIATRIC DIAGNOSIS NOT

1 RECOGNIZED IN THE MOST RECENT EDITION OF THE DIAGNOSTIC AND
2 STATISTICAL MANUAL OF MENTAL DISORDERS IS NOT A JUSTIFIABLE
3 MEDICAL EMERGENCY.

4 (8.8) ~~"Medical direction" includes, but is not limited to, the~~
5 ~~following:~~ "LOCAL LICENSING AUTHORITY" MEANS THE GOVERNING BODY
6 OF A CITY AND COUNTY OR THE BOARD OF COUNTY COMMISSIONERS IN A
7 COUNTY IN THE STATE.

8 (a) ~~Approval of the medical components of treatment protocols~~
9 ~~and appropriate prearrival instructions;~~

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

13 (c) ~~Authority to recommend appropriate changes to protocols for~~
14 ~~the improvement of patient care; and~~

15 (d) ~~Provision of oversight for the ongoing education, training, and~~
16 ~~quality assurance for providers of emergency care.~~

17 (9) ~~"Patient" means any individual who is sick, injured, or~~
18 ~~otherwise incapacitated or helpless.~~ "MEDICAL DIRECTION" INCLUDES, BUT
19 IS NOT LIMITED TO, THE FOLLOWING:

20 (a) APPROVAL OF THE MEDICAL COMPONENTS OF TREATMENT
21 PROTOCOLS AND APPROPRIATE PREARRIVAL INSTRUCTIONS;

22 (b) ROUTINE REVIEW OF PROGRAM PERFORMANCE AND
23 MAINTENANCE OF ACTIVE INVOLVEMENT IN QUALITY IMPROVEMENT
24 ACTIVITIES, INCLUDING ACCESS TO DISPATCH TAPES AS NECESSARY FOR
25 THE EVALUATION OF PROCEDURES;

26 (c) AUTHORITY TO RECOMMEND APPROPRIATE CHANGES TO
27 PROTOCOLS FOR THE IMPROVEMENT OF PATIENT CARE; AND

1 (d) PROVISION OF OVERSIGHT FOR THE ONGOING EDUCATION,
2 TRAINING, AND QUALITY ASSURANCE FOR PROVIDERS OF EMERGENCY
3 CARE.

4 (9.5) "PATIENT" MEANS AN INDIVIDUAL WHO IS SICK, INJURED, OR
5 OTHERWISE INCAPACITATED OR HELPLESS.

6 **SECTION 4.** In Colorado Revised Statutes, 25-3.5-104, **amend**
7 (4)(d) as follows:

8 **25-3.5-104. Emergency medical and trauma services advisory**
9 **council - creation - duties.**

10 (4) The council shall:

11 (d) Review and ~~approve~~ MAKE RECOMMENDATIONS ON new rules
12 CONCERNING EMERGENCY MEDICAL AND TRAUMA SERVICES and
13 modifications to rules CONCERNING EMERGENCY MEDICAL AND TRAUMA
14 SERVICES existing prior to July 1, 2000, prior to the adoption of such rules
15 or modifications by the state board of health;

16

17 **SECTION 5.** In Colorado Revised Statutes, **add** 25.5-4-436 as
18 follows:

19 **25.5-4-436. Transportation by ambulance or other vehicle -**
20 **treatment on scene of a medical emergency - evaluation by**
21 **telemedicine - definitions.**

22 (1) ON AND AFTER JANUARY 1, 2027, THE STATE DEPARTMENT
23 SHALL REIMBURSE:

24 (a) AN AMBULANCE SERVICE ~~FOR GROUND~~ TRANSPORTATION BY
25 AN AMBULANCE OR OTHER APPROPRIATELY SITUATED VEHICLE TO A
26 HOSPITAL OR OTHER DESTINATION AS DEEMED APPROPRIATE BY THE
27 AMBULANCE SERVICE'S MEDICAL DIRECTOR;

1 (b) AN AMBULANCE SERVICE ■ ■ FOR TREATMENT ON THE SCENE
2 OF A MEDICAL EMERGENCY, WHICH TREATMENT DOES NOT RESULT IN
3 GROUND TRANSPORTATION; AND

4 (c) A QUALIFIED PROVIDER, AN AMBULANCE SERVICE, OR AN
5 AGENCY PROVIDING OUT-OF-HOSPITAL SERVICES FOR EVALUATION BY
6 TELEMEDICINE OF A PERSON BEING TREATED BY AN AMBULANCE SERVICE
7 OR AN AGENCY PROVIDING OUT-OF-HOSPITAL SERVICES FOR THE PURPOSE
8 OF PREVENTING THE NEED TO TRANSPORT THE PERSON TO A HOSPITAL.
9 TELEMEDICINE SHALL BE BILLED USING AN OFFICE OR OTHER OUTPATIENT
10 SERVICES RATE AND NOT USING AN EMERGENCY DEPARTMENT RATE. AN
11 AMBULANCE SERVICE OR AN AGENCY PROVIDING OUT-OF-HOSPITAL
12 SERVICES IS NOT REQUIRED TO PROCURE TELEMEDICINE FOR A COVERED
13 PERSON AS A CONDITION OF PAYMENT.

14 (2) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE
15 REQUIRES:

16 (a) "AMBULANCE SERVICE" HAS THE MEANING SET FORTH IN
17 SECTION 25-3.5-103 (3).

18 (b) (I) "OUT-OF-HOSPITAL SERVICES" MEANS FURNISHING ANY
19 NECESSARY GOODS AND SERVICES OUTSIDE OF A HOSPITAL SETTING FOR
20 THE PURPOSE OF PREVENTING, ALLEVIATING, CURING, OR HEALING HUMAN
21 ILLNESS, A PHYSICAL DISABILITY, A PHYSICAL INJURY, OR A SUBSTANCE
22 USE DISORDER WHILE RESPONDING TO AN EMERGENCY OR OTHER
23 HEALTH-CARE CONDITION.

24 (II) "OUT-OF-HOSPITAL SERVICES" DOES NOT INCLUDE
25 PREHOSPITAL SETTING TRANSPORTS.

26 **SECTION 6.** In Colorado Revised Statutes, 12-280-404, **amend**
27 (7)(b) as follows:

1 **12-280-404. Program operation - access - rules - definitions.**

2 (7) (b) The board may, within existing funds available for
3 operation of the program, provide a means of sharing prescription
4 information and electronic health records through a board-approved
5 vendor and method with the health information organization network, as
6 defined in ~~section 25-3.5-103 (8.5)~~ SECTION 25-3.5-103 (8.6), in order to
7 work collaboratively with the statewide health information exchanges
8 designated by the department of health care policy and financing. Use of
9 the information made available pursuant to this subsection (7)(b) is
10 subject to privacy and security protections in state law and the federal
11 "Health Insurance Portability and Accountability Act of 1996",
12 Pub.L.104-191, as amended, and any implementing regulations.

13 **SECTION 7.** In Colorado Revised Statutes, 25-54-101, **amend**
14 **(4)** as follows:

15 **25-54-101. Definitions.**

16 As used in this article 54, unless the context otherwise requires:

17 (4) "Health information organization network" ~~means a Colorado~~
18 ~~organization that has experience in overseeing and governing the~~
19 ~~exchange of health-related information among organizations according~~
20 ~~to Colorado law and nationally recognized standards including but not~~
21 ~~limited to the federal "Health Insurance Portability and Accountability~~
22 ~~Act of 1996", Pub.L. 104-191, as amended~~ HAS THE MEANING SET FORTH
23 IN SECTION 25-3.5-103 (8.6).

24 **SECTION 8.** In Colorado Revised Statutes, 27-50-101, **amend**
25 **(14)** as follows:

26 **27-50-101. Definitions.**

27 As used in this article 50, unless the context otherwise requires:

1 (14) "Health information organization network" has the same
2 meaning as defined in ~~section 25-3.5-103 (8.5)~~ SECTION 25-3.5-103 (8.6).

3 **SECTION 9. Appropriation - adjustments to 2026 long bill.**

4 (1) Except as provided in subsection (3) of this section, to implement this
5 act, appropriations made in the annual general appropriation act for the
6 2026-27 state fiscal year to the department of health care policy and
7 financing for medical and long-term care services for Medicaid eligible
8 individuals are adjusted as follows:

9 (a) The general fund appropriation is decreased by \$548,547; and

10 (b) The cash funds appropriation from the healthcare affordability
11 and sustainability hospital provider fee cash fund created in section
12 25.5-4-402.4 (5)(a), C.R.S., is decreased by \$124,822.

13 (2) The decrease of the appropriations in subsection (1) of this
14 section is based on the assumption that the anticipated amount of federal
15 funds received for the 2026-27 state fiscal year by the department of
16 health care policy and financing for medical and long-term care services
17 for Medicaid eligible individuals will decrease by \$1,458,735.

18 (3) Subsection (1) of this section does not require a reduction of
19 an appropriation in the annual general appropriation act for the 2026-27
20 state fiscal year if:

21 (a) The amount of the general fund appropriation made in the
22 annual general appropriation act for the 2026-27 state fiscal year to the
23 department of department of health care policy and financing for medical
24 and long-term care services for Medicaid eligible individuals is less than
25 the amount of the adjustment required in subsection (1) of this section; or

26 (b) The annual general appropriation act for the 2026-27 state
27 fiscal year does not include an appropriation to the department of health

1 care policy and financing for medical and long-term care services for
2 Medicaid eligible individuals.

3 **SECTION 10. Appropriation.** For the 2026-27 state fiscal year,
4 \$26,353 is appropriated to the department of public health and
5 environment for use by the health facilities and emergency medical
6 services division. This appropriation is from the general fund. To
7 implement this act, the division may use this appropriation for
8 administration and operations.

9 **SECTION 11. Effective date.** This act takes effect upon passage;
10 except that section 9 of this act takes effect only if the annual general
11 appropriation act for the 2026-27 state fiscal year becomes law, in which
12 case section 9 takes effect upon the effective date of this act or of the
13 annual general appropriation act for state fiscal year 2026-27, whichever
14 is later.

15 **SECTION 12. Safety clause.** The general assembly finds,
16 determines, and declares that this act is necessary for the immediate
17 preservation of the public peace, health, or safety or for appropriations for
18 the support and maintenance of the departments of the state and state
19 institutions.