## Second Regular Session Seventy-fourth General Assembly STATE OF COLORADO

DRAFT 9/19/23

Bill 6

LLS NO. 24-0233.01 Josh Schultz x5486

**INTERIM COMMITTEE BILL** 

Colorado Youth Advisory Council Review Committee

**BILL TOPIC:** Availability Youth Gender-affirming Care Training

## A BILL FOR AN ACT

## 101 CONCERNING IMPROVING THE AVAILABILITY OF TRAINING FOR YOUTH

102 GENDER-AFFIRMING HEALTH CARE.

## **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 <u>http://leg.colorado.gov/</u>.)

**Colorado Youth Advisory Council Review Committee.** The bill creates the youth gender-affirming health-care training grant program (grant program) within the department of public health and environment (department). The department is required to promulgate rules to implement the grant program.

Grant recipients shall use the money received through the grant program to provide:

Capital letters or bold & italic numbers indicate new material to be added to existing law. Dashes through the words indicate deletions from existing law.

- Funding for physicians and advanced practice providers to receive continuing medical education in gender-affirming health care; or
- A stipend to reimburse physicians and advanced practice providers for time spent conducting continuing medical education in gender-affirming health care.

Annually, starting in 2026, the department shall provide a report on the grant program to specified committees of the general assembly that includes the following information:

- The type and geographic region of the health-care facilities receiving grants;
- The specific training programs utilized by grant recipients;
- The amount of funding given to each grant recipient; and
- Any other information that the department deems appropriate.

The bill creates the gender-affirming health-care task force (task force) in the department to examine the status of gender-affirming health care in Colorado, especially for youth in rural areas. On or before January 1, 2025, the executive director of the department shall appoint 17 members to the task force. The task force must submit a report to committees of the general assembly by December 31, 2026.

1	Be it enacted by the General Assembly of the State of Colorado:
2	SECTION 1. In Colorado Revised Statutes, add article 59 to title
3	25 as follows:
4	ARTICLE 59
5	Youth Gender-affirming Health Care
6	<b>25-59-101. Definitions.</b> As used in this article <b>59</b> , unless the
7	CONTEXT OTHERWISE REQUIRES:
8	(1) "DEPARTMENT" MEANS THE DEPARTMENT OF PUBLIC HEALTH
9	AND ENVIRONMENT CREATED IN SECTION 25-1-102.
10	(2) "EXECUTIVE DIRECTOR" MEANS THE EXECUTIVE DIRECTOR OF
11	THE DEPARTMENT OR THE EXECUTIVE DIRECTOR'S DESIGNEE.
12	(3) "Gender-Affirming health-care services" means all
13	SUPPLIES, CARE, AND SERVICES OF A MEDICAL, BEHAVIORAL HEALTH,

-2-

1 MENTAL HEALTH, PSYCHIATRIC, HABILITATIVE, SURGICAL, THERAPEUTIC,

DIAGNOSTIC, PREVENTIVE, REHABILITATIVE, OR SUPPORTIVE NATURE
RELATING TO THE TREATMENT OF GENDER DYSPHORIA.

4 (4) "GRANT PROGRAM" MEANS THE YOUTH GENDER-AFFIRMING
5 HEALTH-CARE TRAINING GRANT PROGRAM CREATED IN SECTION
6 25-59-102.

7 (5) "HEALTH-CARE FACILITY" MEANS A FACILITY LICENSED OR
8 CERTIFIED BY THE DEPARTMENT PURSUANT TO SECTION 25-1.5-103.

9 (6) "PROVIDER" MEANS A PHYSICIAN OR ADVANCED PRACTICE
10 PROVIDER, AS DEFINED IN SECTION 25-1.5-502.

11 (7) "TASK FORCE" MEANS THE GENDER-AFFIRMING HEALTH-CARE
12 TASK FORCE CREATED IN SECTION 25-59-103 (1).

13 25-59-102. Youth gender-affirming health-care training grant
14 program - created - rules - reporting. (1) FOR THE PURPOSE OF
15 PROVIDING FUNDING TO HEALTH-CARE FACILITIES AND PROVIDERS TO HELP
16 ENSURE THAT YOUTH RECEIVE TIMELY AND CONVENIENT ACCESS TO
17 GENDER-AFFIRMING HEALTH CARE, THERE IS HEREBY CREATED WITHIN THE
18 DEPARTMENT THE YOUTH GENDER-AFFIRMING HEALTH-CARE TRAINING
19 GRANT PROGRAM.

20 (2) A HEALTH-CARE FACILITY OR PROVIDER MAY APPLY FOR A
21 GRANT UNDER THE GRANT PROGRAM. GRANT RECIPIENTS SHALL USE THE
22 MONEY RECEIVED THROUGH THE GRANT PROGRAM TO PROVIDE:

(a) FUNDING TO PAY PROGRAM COSTS ASSOCIATED WITH
PROVIDERS RECEIVING CONTINUING MEDICAL EDUCATION IN
GENDER-AFFIRMING HEALTH CARE; OR

26 (b) A STIPEND TO REIMBURSE PROVIDERS FOR TIME SPENT
27 COMPLETING CONTINUING MEDICAL EDUCATION IN GENDER-AFFIRMING
28 HEALTH CARE.

-3-

1 (3) THE DEPARTMENT SHALL ADMINISTER THE GRANT PROGRAM 2 AND, SUBJECT TO AVAILABLE APPROPRIATIONS, SHALL AWARD GRANTS IN 3 ACCORDANCE WITH THIS SECTION. 4 (4) THE EXECUTIVE DIRECTOR SHALL IMPLEMENT THE GRANT 5 PROGRAM IN ACCORDANCE WITH THIS SECTION. PURSUANT TO ARTICLE 4 6 OF TITLE 24, BY JANUARY 1, 2025, THE EXECUTIVE DIRECTOR SHALL 7 PROMULGATE RULES AS REQUIRED IN THIS SUBSECTION (4) AND ANY 8 ADDITIONAL RULES AS MAY BE NECESSARY TO IMPLEMENT THE GRANT 9 PROGRAM. AT A MINIMUM, THE RULES MUST SPECIFY THE: 10 (a) TIME FRAMES FOR APPLYING FOR GRANTS; 11 (b) FORM OF THE GRANT PROGRAM APPLICATION; 12 (c) CRITERIA FOR DETERMINING ELIGIBILITY FOR THE GRANT

13 program;

14 (d) CRITERIA FOR ACCEPTABLE TYPES OF CONTINUING MEDICAL
15 EDUCATION IN GENDER-AFFIRMING HEALTH CARE;

16 (e) CRITERIA THE DEPARTMENT SHALL CONSIDER IN AWARDING
17 GRANTS; AND

18 (f) DEADLINES FOR DISTRIBUTING GRANT MONEY.

19 (5) TO RECEIVE A GRANT, AN ELIGIBLE PROVIDER OR HEALTH-CARE
20 FACILITY MUST SUBMIT AN APPLICATION TO THE DEPARTMENT IN
21 ACCORDANCE WITH RULES DEVELOPED PURSUANT TO SUBSECTION (4) OF
22 THIS SECTION.

(6) IN AWARDING GRANTS, THE DEPARTMENT SHALL PRIORITIZE
APPLICATIONS RECEIVED FROM FAMILY PLANNING CLINICS; FEDERALLY
QUALIFIED HEALTH CENTERS, AS DEFINED IN THE FEDERAL "SOCIAL
SECURITY ACT", 42 U.S.C. SEC. 1395x (aa)(4); AND RURAL HEALTH
CLINICS, AS DEFINED IN THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C.
SEC. 1395x (aa)(2) TO ENSURE ACCESS TO GENDER-AFFIRMING

-4-

1 HEALTH-CARE SERVICES IN UNDERSERVED AREAS.

2 (7) ON OR BEFORE DECEMBER 31, 2026, AND ON OR BEFORE 3 DECEMBER 31 EACH YEAR THEREAFTER FOR THE DURATION OF THE GRANT 4 PROGRAM, THE DEPARTMENT SHALL SUBMIT A SUMMARIZED REPORT ON 5 THE GRANT PROGRAM TO THE HOUSE OF REPRESENTATIVES HEALTH AND 6 INSURANCE COMMITTEE, THE HOUSE OF REPRESENTATIVES PUBLIC AND 7 BEHAVIORAL HEALTH AND HUMAN SERVICES COMMITTEE, AND THE 8 SENATE HEALTH AND HUMAN SERVICES COMMITTEE, OR THEIR SUCCESSOR 9 COMMITTEES. AT A MINIMUM, THE REPORT MUST INCLUDE:

10 (a) INFORMATION ON THE TYPE AND GEOGRAPHIC REGION OF THE
11 HEALTH-CARE FACILITIES RECEIVING GRANTS, WITHOUT DISCLOSING
12 IDENTITIES OF GRANT RECIPIENTS;

13 (b) The specific training programs used by grant
14 recipients;

15 (c) THE AMOUNT OF FUNDING GIVEN TO EACH GRANT RECIPIENT;
16 AND

17 (d) ANY OTHER INFORMATION THAT THE DEPARTMENT DEEMS18 APPROPRIATE.

19 (8) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), THE
20 REPORTING REQUIREMENTS SET FORTH IN THIS SECTION CONTINUE UNTIL
21 THIS ARTICLE 59 IS REPEALED PURSUANT TO SECTION 25-59-104.

22 25-59-103. Gender-affirming health-care task force 23 membership - report. (1) THERE IS HEREBY CREATED IN THE
24 DEPARTMENT THE GENDER-AFFIRMING HEALTH-CARE TASK FORCE TO
25 EXAMINE THE STATUS OF GENDER-AFFIRMING HEALTH-CARE SERVICES IN
26 COLORADO, ESPECIALLY FOR YOUTH IN RURAL AREAS.

27 (2) (a) THE TASK FORCE CONSISTS OF SEVENTEEN MEMBERS,
28 THIRTEEN OF WHOM ARE APPOINTED BY THE EXECUTIVE DIRECTOR

-5-

1 PURSUANT TO SUBSECTION (2)(b) OF THIS SECTION.

2 (b) THE MEMBERSHIP OF THE TASK FORCE APPOINTED BY THE
3 EXECUTIVE DIRECTOR IS AS FOLLOWS:

4 (I) THREE PROVIDERS WITH EXPERIENCE IN PROVIDING
5 GENDER-AFFIRMING HEALTH-CARE SERVICES, INCLUDING AT LEAST ONE
6 PEDIATRICIAN;

7 (II) THREE MENTAL HEALTH PROVIDERS, INCLUDING AT LEAST ONE
8 WHO TREATS PEOPLE UNDER EIGHTEEN YEARS OF AGE;

9 (III) THREE PERSONS UNDER EIGHTEEN YEARS OF AGE, INCLUDING
10 AT LEAST ONE MEMBER FROM RURAL COLORADO;

(IV) THREE MEMBERS OF THE GENERAL PUBLIC, INCLUDING AT
 LEAST ONE MEMBER FROM RURAL COLORADO; AND

13 (V) ONE MEMBER REPRESENTING THE HEALTH EQUITY
14 COMMISSION ESTABLISHED IN SECTION 25-4-2206.

15 (c) THE REMAINING MEMBERS OF THE TASK FORCE ARE:

(I) A MEMBER OF THE FAMILY PLANNING PILOT PROGRAM,
ESTABLISHED IN SECTION 25.5-5-319, AS APPOINTED BY THE EXECUTIVE
DIRECTOR OF THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING;
(II) AN EMPLOYEE OF THE DEPARTMENT OF HEALTH CARE POLICY
AND FINANCING, ESTABLISHED IN SECTION 24-1-119.5, AS APPOINTED BY
THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF HEALTH CARE POLICY
AND FINANCING;

(III) AN EMPLOYEE OF THE DIVISION OF INSURANCE IN THE
DEPARTMENT OF REGULATORY AGENCIES, ESTABLISHED IN SECTION
10-1-103, AS APPOINTED BY THE EXECUTIVE DIRECTOR OF THE
DEPARTMENT OF REGULATORY AGENCIES; AND

27 (IV) AN EMPLOYEE OF THE BEHAVIORAL HEALTH ADMINISTRATION
28 IN THE DEPARTMENT OF HUMAN SERVICES, ESTABLISHED IN SECTION

DRAFT

-6-

27-50-102, AS APPOINTED BY THE EXECUTIVE DIRECTOR OF THE
 DEPARTMENT OF HUMAN SERVICES.

3 (d) THE DEPARTMENT SHALL GIVE PREFERENCE TO TASK FORCE
4 APPLICANTS WHO SELF-IDENTIFY AS LESBIAN, GAY, BISEXUAL,
5 TRANSGENDER, OR NONBINARY IN ORDER TO ENSURE ADEQUATE
6 REPRESENTATION.

7 (e) All APPOINTMENTS TO THE TASK FORCE SHALL BE MADE NO
8 LATER THAN JANUARY 1, 2025.

9 (f) THE MEMBERS OF THE TASK SHALL SERVE WITHOUT 10 COMPENSATION; EXCEPT THAT THE DEPARTMENT SHALL REIMBURSE TASK 11 FORCE MEMBERS APPOINTED BY THE EXECUTIVE DIRECTOR FOR TRAVEL 12 EXPENSES TO AND FROM MEETINGS OF THE TASK FORCE, INCLUDING VISITS 13 TO HEALTH-CARE FACILITIES THROUGHOUT THE STATE.

14 (g) THE DEPARTMENT SHALL PROVIDE STAFF SUPPORT TO THE TASK
15 FORCE TO ASSIST THE TASK FORCE IN CARRYING OUT ITS DUTIES.

16 (3) THE TASK FORCE SHALL:

17 (a) HOLD AT LEAST TWELVE MEETINGS, WHICH MAY BE HELD18 ONLINE OR IN PERSON;

19 (b) CONDUCT IN-PERSON AND ONLINE VISITS TO HEALTH-CARE20 FACILITIES THROUGHOUT THE STATE;

(c) DETERMINE THE DISPARITIES AND INADEQUACIES IN THE
COLORADO GENDER-AFFIRMING HEALTH-CARE SECTOR BY INVESTIGATING:
(I) THE NUMBER OF GENDER-AFFIRMING HEALTH-CARE PROVIDERS
AND FACILITIES IN EACH REGION;

25 (II) THE RESOURCES AVAILABLE TO GENDER-AFFIRMING
26 HEALTH-CARE PROVIDERS AND FACILITIES IN THE STATE;

27 (III) THREATS TO GENDER-AFFIRMING HEALTH-CARE PROVIDERS;
28 (IV) THE NUMBER OF PATIENTS SEEKING GENDER-AFFIRMING

-7-

1 HEALTH-CARE SERVICES IN EACH REGION, INCLUDING A COMPARISON TO

2 THE NUMBER OF PROVIDERS;

3 (V) THE TYPES OF GENDER-AFFIRMING HEALTH-CARE SERVICES
4 THAT PATIENTS SEEK;

5 (VI) THE PREVALENCE AND IMPACT OF NONPRESCRIBED 6 TREATMENTS; AND

7 (VII) THE AVAILABILITY OF INSURANCE COVERAGE FOR DIFFERENT
8 TYPES OF TREATMENT;

9 (d) ON OR BEFORE DECEMBER 31, 2026, SUBMIT A REPORT, 10 INCLUDING ITS FINDINGS AND RECOMMENDATIONS ON THE ISSUES 11 IDENTIFIED IN SUBSECTION (3)(c) OF THIS SECTION AND OTHER 12 INFORMATION THAT THE DEPARTMENT DEEMS APPROPRIATE, TO THE 13 HOUSE OF REPRESENTATIVES HEALTH AND INSURANCE COMMITTEE, THE 14 HOUSE OF REPRESENTATIVES PUBLIC AND BEHAVIORAL HEALTH AND 15 HUMAN SERVICES COMMITTEE, AND THE SENATE HEALTH AND HUMAN 16 SERVICES COMMITTEE, OR THEIR SUCCESSOR COMMITTEES; AND

17 (e) POST THE FINAL REPORT, WHICH MUST BE MADE AVAILABLE AS
18 A PUBLIC RECORD ON A PUBLIC-FACING PORTION OF THE DEPARTMENT'S
19 WEBSITE.

20 (4) This section is repealed, effective September 1, 2027.

21 25-59-104. Repeal of article. This ARTICLE 59 IS REPEALED,
22 EFFECTIVE SEPTEMBER 1, 2029.

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, or safety.

-8-