First Regular Session Seventieth General Assembly STATE OF COLORADO

PREAMENDED

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

LLS NO. 15-0168.01 Kristen Forrestal x4217

HOUSE BILL 15-1233

HOUSE SPONSORSHIP

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SENATE SPONSORSHIP

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House Committees Public Health Care & Human Services Appropriations **Senate Committees**

A BILL FOR AN ACT

101 CONCERNING THE CREATION OF THE RESPITE CARE TASK FORCE.

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://www.leg.state.co.us/billsummaries.</u>)

The bill creates the respite care task force to study the dynamics of supply and demand with regard to respite care services in Colorado. The majority and minority leadership of the Senate and House of Representatives shall appoint 9 members to the task force, who shall serve without compensation. The department of human services is directed to provide staff support to the task force. The task force is required to submit a report to the general assembly by December 1, 2015.

1	Be it enacted by the General Assembly of the State of Colorado:
2	SECTION 1. Legislative declaration. (1) The general assembly
3	determines and declares that:
4	(a) The current extent of demand for respite care in Colorado is
5	unknown, although it is apparent that there is a lack of adequate respite
6	care facilities and respite training programs in Colorado;
7	(b) Caregivers work twenty-four hours per day, seven days per
8	week to ensure their loved ones have the support and tools they need to
9	live their best lives;
10	(c) It is critical that caregivers in our communities have access to
11	respite care so that they have time to rejuvenate and spend time with their
12	families and friends;
13	(d) It is important that caregivers are able to trust and depend on
14	the individuals providing respite care to their loved ones; and
15	(e) Reliable access to affordable respite care will be beneficial to
16	caregivers and to their families and loved ones.
17	(2) Therefore, it is the intent of the general assembly to create a
18	respite care task force and to:
19	(a) Authorize a study to determine the current state of respite care
20	in Colorado, including access to care and funding of respite care services;
21	(b) Determine the availability and level of culturally competent
22	and patient-centered respite care; and
23	(c) Increase the availability of affordable respite care throughout
24	Colorado.
25	SECTION 2. In Colorado Revised Statutes, add part 6 to article
26	1 of title 26 as follows:

1	PART 6
2	RESPITE CARE TASK FORCE
3	26-1-601. Task force - creation. (1) THERE IS CREATED, WITHIN
4	THE DEPARTMENT OF HUMAN SERVICES, THE RESPITE CARE TASK FORCE TO
5	STUDY THE DYNAMICS OF SUPPLY AND DEMAND WITH REGARD TO RESPITE
6	CARE SERVICES IN COLORADO. THE TASK FORCE CONSISTS OF THE
7	MEMBERS APPOINTED IN ACCORDANCE WITH SUBSECTION (2) OF THIS
8	SECTION.
9	(2) NO LATER THAN JULY 1, 2015:
10	(a) The speaker of the house of representatives shall
11	APPOINT:
12	(I) ONE MEMBER OF THE HOUSE OF REPRESENTATIVES; AND
13	(II) ONE PERSON WHO REPRESENTS A LICENSED HOSPICE
14	ORGANIZATION;
15	(b) THE MINORITY LEADER OF THE HOUSE OF REPRESENTATIVES
16	SHALL APPOINT:
17	(I) ONE PERSON FROM AN ORGANIZATION THAT REPRESENTS
18	PERSONS WITH DEVELOPMENTAL DISABILITIES; AND
19	(II) ONE OWNER OR OPERATOR OF A RESPITE CARE FACILITY;
20	(c) THE PRESIDENT OF THE SENATE SHALL APPOINT:
21	(I) ONE MEMBER OF THE SENATE; AND
22	(II) ONE MEMBER OF AN ORGANIZATION THAT PROVIDES SERVICES,
23	EDUCATION, AND OUTREACH TO SENIORS;
24	(d) THE MINORITY LEADER OF THE SENATE SHALL APPOINT:
25	(I) ONE MEMBER OF AN ORGANIZATION THAT ADVANCES
26	RESEARCH TO END ALZHEIMER'S DISEASE; AND
27	(II) ONE PERSON WHO REPRESENTS PERSONS WITH BRAIN INJURIES;

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- (e) THE GOVERNOR SHALL APPOINT:
- 2 (I) ONE REPRESENTATIVE FROM THE DEPARTMENT OF HUMAN 3 SERVICES;
- 4 (II) ONE PERSON FROM A RURAL AREA WHO UTILIZES RESPITE 5 CARE:
- 6 (III) ONE MEMBER OF AN ORGANIZATION THAT PROVIDES
 7 SERVICES, EDUCATION, AND OUTREACH IN THE AREA OF MENTAL HEALTH;
 8 (IV) ONE PERSON WHO PROVIDES SERVICES, EDUCATION, AND
 9 OUTREACH FOR PERSONS WITH CHRONIC CONDITIONS, LONG-TERM
 10 CONDITIONS, AND DISABLING CONDITIONS ACROSS A LIFE SPAN;
- 11 (V) ONE PERSON WHO REPRESENTS A LICENSED HOME HEALTH 12 CARE AGENCY;
- (VI) ONE PERSON WHO REPRESENTS A NONPROFIT ENTITY THAT
 PROVIDES SERVICES, EDUCATION, OUTREACH, AND ADVOCACY TO PERSONS
 WITH DISABILITIES;
- (VII) ONE REPRESENTATIVE OF THE DEPARTMENT OF HEALTH CARE
 POLICY AND FINANCING; AND
- (VIII) ONE REPRESENTATIVE OF THE DEPARTMENT OF PUBLIC
 HEALTH AND ENVIRONMENT, WHO SHALL BE THE SOLE NONVOTING
 MEMBER OF THE TASK FORCE.
- (f) THE APPOINTING AUTHORITIES SHALL STRIVE TO ENSURE THAT
 THE APPOINTEES, AS A WHOLE, WILL REPRESENT THE INTERESTS AND
 CONCERNS OF ALL PERSONS WHO CAN BE PREDICTED TO NEED RESPITE
 CARE, INCLUDING THE YOUNG AND PERSONS FROM DIVERSE SOCIAL AND
 CULTURAL BACKGROUNDS.
- 26 (3) (a) THE DEPARTMENT SHALL RETAIN A FACILITATOR FOR THE
 27 TASK FORCE WHO SHALL CONVENE THE FIRST MEETING OF THE TASK FORCE

1	NO LATER THAN JULY 15, 2015, AT WHICH MEETING THE TASK FORCE
2	MEMBERS SHALL SELECT FROM AMONG THE MEMBERSHIP A PERSON TO
3	SERVE AS CHAIR OF THE TASK FORCE. THE TASK FORCE SHALL MEET UPON
4	THE CALL OF THE CHAIR AS OFTEN AS NECESSARY TO COMPLETE THE
5	STUDY SPECIFIED IN THIS PART 6. THE TASK FORCE MAY MEET WITHIN THE
6	COMMITTEE HEARING ROOMS OF THE STATE CAPITOL, SUBJECT TO
7	AVAILABILITY.
8	(b) NOTWITHSTANDING SECTION 2-2-236, C.R.S., THE TASK FORCE
9	MEMBERS SHALL SERVE WITHOUT COMPENSATION AND WITHOUT
10	REIMBURSEMENT FOR EXPENSES.
11	(c) IF A VACANCY OCCURS ON THE TASK FORCE FOR ANY REASON,
12	THE ORIGINAL APPOINTING AUTHORITY SHALL APPOINT A PERSON WHO
13	MEETS THE REQUIREMENTS OF THE VACANT POSITION TO FILL THE
1 4	VACANCY AS SOON AS DOSSIDE E ATTEM THE VACANCY OCCUPS
14	VACANCY AS SOON AS POSSIBLE AFTER THE VACANCY OCCURS.
14 15	26-1-602. Respite care study - report. (1) THE RESPITE CARE
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15 16	26-1-602. Respite care study - report. (1) The respite Care TASK FORCE CREATED IN SECTION 26-1-601 SHALL STUDY, THROUGH DATA
15 16 17	26-1-602. Respite care study - report. (1) The respite care task force created in section 26-1-601 shall study, through data collection, the dynamics of the supply of, and demand for,
15 16 17 18	26-1-602. Respite care study - report. (1) The respite care task force created in section 26-1-601 shall study, through data collection, the dynamics of the supply of, and demand for, respite care services in this state. The study may include the
15 16 17 18 19	26-1-602. Respite care study - report. (1) The respite care task force created in section 26-1-601 shall study, through data collection, the dynamics of the supply of, and demand for, respite care services in this state. The study may include the following issues:
15 16 17 18 19 20	26-1-602. Respite care study - report. (1) The respite care TASK FORCE CREATED IN SECTION 26-1-601 SHALL STUDY, THROUGH DATA COLLECTION, THE DYNAMICS OF THE SUPPLY OF, AND DEMAND FOR, RESPITE CARE SERVICES IN THIS STATE. THE STUDY MAY INCLUDE THE FOLLOWING ISSUES: (a) ACCESS TO RESPITE CARE SERVICES;
15 16 17 18 19 20 21	 26-1-602. Respite care study - report. (1) The respite care TASK FORCE CREATED IN SECTION 26-1-601 SHALL STUDY, THROUGH DATA COLLECTION, THE DYNAMICS OF THE SUPPLY OF, AND DEMAND FOR, RESPITE CARE SERVICES IN THIS STATE. THE STUDY MAY INCLUDE THE FOLLOWING ISSUES: (a) ACCESS TO RESPITE CARE SERVICES; (b) THE TYPES OF SERVICES THAT ARE MOST IN DEMAND AND THE
15 16 17 18 19 20 21 22	 26-1-602. Respite care study - report. (1) The respite care TASK FORCE CREATED IN SECTION 26-1-601 SHALL STUDY, THROUGH DATA COLLECTION, THE DYNAMICS OF THE SUPPLY OF, AND DEMAND FOR, RESPITE CARE SERVICES IN THIS STATE. THE STUDY MAY INCLUDE THE FOLLOWING ISSUES: (a) ACCESS TO RESPITE CARE SERVICES; (b) THE TYPES OF SERVICES THAT ARE MOST IN DEMAND AND THE SERVICES THAT ARE CURRENTLY AVAILABLE;
 15 16 17 18 19 20 21 22 23 	 26-1-602. Respite care study - report. (1) The respite care TASK FORCE CREATED IN SECTION 26-1-601 SHALL STUDY, THROUGH DATA COLLECTION, THE DYNAMICS OF THE SUPPLY OF, AND DEMAND FOR, RESPITE CARE SERVICES IN THIS STATE. THE STUDY MAY INCLUDE THE FOLLOWING ISSUES: (a) ACCESS TO RESPITE CARE SERVICES; (b) THE TYPES OF SERVICES THAT ARE MOST IN DEMAND AND THE SERVICES THAT ARE CURRENTLY AVAILABLE; (c) THE AVAILABILITY AND LEVEL OF CULTURALLY COMPETENT
 15 16 17 18 19 20 21 22 23 24 	26-1-602. Respite care study - report. (1) The respite care TASK FORCE CREATED IN SECTION 26-1-601 SHALL STUDY, THROUGH DATA COLLECTION, THE DYNAMICS OF THE SUPPLY OF, AND DEMAND FOR, RESPITE CARE SERVICES IN THIS STATE. THE STUDY MAY INCLUDE THE FOLLOWING ISSUES: (a) ACCESS TO RESPITE CARE SERVICES; (b) THE TYPES OF SERVICES THAT ARE MOST IN DEMAND AND THE SERVICES THAT ARE CURRENTLY AVAILABLE; (c) THE AVAILABILITY AND LEVEL OF CULTURALLY COMPETENT CARE AND PATIENT-CENTERED CARE;

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1	(f) THE FUNDING OF RESPITE CARE SERVICES, INCLUDING ACCESS
2	TO THAT FUNDING; AND
3	(g) OTHER RESPITE CARE ISSUES AS DETERMINED APPROPRIATE BY
4	THE TASK FORCE.
5	(2) THE RESPITE CARE TASK FORCE MAY DISCUSS POLICIES THAT
6	INCLUDE, BUT ARE NOT LIMITED TO:
7	(a) REQUIRING THE DEPARTMENT OF HUMAN SERVICES, THE
8	DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, AND THE
9	DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT TO CREATE A
10	STRUCTURE TO GIVE ONE DEPARTMENT THE RESPONSIBILITY TO LICENSE
11	RESPITE CAREGIVERS AND ADDRESS THE PAYMENT FOR SERVICES;
12	(b) THE CREATION OF PILOT PROGRAMS BY COMMUNITY COLLEGES,
13	TECHNICAL SCHOOLS, AND EDUCATIONAL INSTITUTIONS OFFERING
14	FOUR-YEAR DEGREES TO TRAIN RESPITE CAREGIVERS; AND
15	(c) THE DEVELOPMENT OF DATA COLLECTION, RECOMMENDATIONS
16	FOR RESPITE CARE UTILIZATION, ACCESS, AND AVAILABILITY OF SERVICES.
17	(3) The department of human services is authorized to
18	CONTRACT FOR AN EXTERNAL STUDY CONCERNING RESPITE CARE. THE
19	DEPARTMENT SHALL DEVELOP CRITERIA AND COMPONENTS FOR THE
20	STUDY. THE FINAL STUDY RESULTS MUST BE PROVIDED TO THE RESPITE
21	CARE TASK FORCE.
22	(4) ON OR BEFORE JANUARY 31, 2016, THE RESPITE CARE TASK
23	FORCE, WITH ASSISTANCE FROM THE DEPARTMENT OF HUMAN SERVICES,
24	SHALL SUBMIT A REPORT THAT INCLUDES ITS FINDINGS AND
25	RECOMMENDATIONS TO THE PUBLIC HEALTH CARE AND HUMAN SERVICES
26	COMMITTEE OF THE HOUSE OF REPRESENTATIVES AND THE HEALTH AND
27	HUMAN SERVICES COMMITTEE OF THE SENATE, OR THEIR SUCCESSOR

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1 COMMITTEES.

2	26-1-603. Notice of funding through gifts, grants, and
3	donations - respite care task force fund - repeal. (1) (a) The RESPITE
4	CARE TASK FORCE IS AUTHORIZED TO SEEK AND ACCEPT GIFTS, GRANTS, OR
5	DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR THE PURPOSES OF THIS
6	PART 6; EXCEPT THAT THE TASK FORCE MAY NOT ACCEPT A GIFT, GRANT,
7	OR DONATION THAT IS SUBJECT TO CONDITIONS THAT ARE INCONSISTENT
8	WITH THIS PART 6 OR ANY OTHER LAW OF THE STATE. THE RESPITE CARE
9	TASK FORCE SHALL TRANSMIT ALL PRIVATE AND PUBLIC MONEYS
10	RECEIVED THROUGH GIFTS, GRANTS, OR DONATIONS TO THE STATE
11	TREASURER, WHO SHALL CREDIT THEM TO THE RESPITE CARE TASK FORCE
12	FUND, WHICH FUND IS HEREBY CREATED AND REFERRED TO IN THIS PART
13	6 AS THE "FUND". THE MONEYS IN THE FUND ARE SUBJECT TO ANNUAL
14	APPROPRIATION BY THE GENERAL ASSEMBLY TO THE DEPARTMENT OF
15	HUMAN SERVICES FOR THE DIRECT AND INDIRECT COSTS ASSOCIATED WITH
16	IMPLEMENTING THIS PART 6.
17	(b) (I) IN SEEKING OR ACCEPTING A GIFT, GRANT, OR DONATION,
18	THE DEPARTMENT OF HUMAN SERVICES SHALL NOTIFY THE LEGISLATIVE
19	COUNCIL STAFF WHEN IT HAS RECEIVED ADEQUATE FUNDING THROUGH
20	GIFTS, GRANTS, OR DONATIONS FOR THE RESPITE CARE TASK FORCE AND
21	SHALL INCLUDE IN THE NOTIFICATION THE INFORMATION SPECIFIED IN
22	SECTION 24-75-1303 (3), C.R.S.
23	(II) THIS PARAGRAPH (b) IS REPEALED, EFFECTIVE JULY 1, 2016.
24	26-1-604. Repeal. This part 6 is repealed, effective July 1,
25	2016.
26	SECTION 3. Safety clause. The general assembly hereby finds,

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- 1 determines, and declares that this act is necessary for the immediate
- 2 preservation of the public peace, health, and safety.