Second Regular Session Sixty-seventh General Assembly STATE OF COLORADO

REENGROSSED

This Version Includes All Amendments Adopted in the House of Introduction SENATE BILL 10-073

LLS NO. 10-0240.01 Kate Meyer

SENATE SPONSORSHIP

Tapia,

McFadyen,

HOUSE SPONSORSHIP

Senate Committees Health and Human Services Appropriations

House Committees

A BILL FOR AN ACT

101 CONCERNING THE NURSE HOME VISITOR PROGRAM DUTIES OF THE

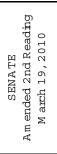
102 HEALTH SCIENCES FACILITY AT THE UNIVERSITY OF COLORADO.

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://www.leg.state.co.us/billsummaries.)

The bill modifies and clarifies the roles of the department of public health and environment (department) and the health sciences facility at the university of Colorado (health sciences facility) with regard to the nurse home visitor program (program), which receives moneys from tobacco litigation settlement funds. Specifically, the bill:





- ! Clarifies that the term "health sciences facility" means the Anschutz medical campus, or a successor facility selected by the president of the university of Colorado, at the university of Colorado health sciences center;
- ! Designates the health sciences facility, rather than the department, as the recipient of applications for the program;
- ! Requires the state board of health to consult with the health sciences facility when promulgating rules regarding program applications;
- ! Clarifies that the health sciences facility shall monitor and evaluate the implementation, operation, and effectiveness of the program;
- ! Requires program contractors and entities administering the program to cooperate with the health sciences facility and the department in preparation of those reports;
- ! Requires the nurse home visitor program to pay the annual program evaluation costs incurred by the department and the health sciences facility; and
- ! Clarifies that, except for duties related to program reports, the role of the department under the program is limited to financial administration, and limits to one full-time equivalent employee the annual amount that the department may retain from the nurse home visitor program fund for costs in executing this duty.
- 1 Be it enacted by the General Assembly of the State of Colorado:
- 2 SECTION 1. 2-3-113 (1) and (4), Colorado Revised Statutes, are
- 3 <u>amended to read:</u>

4

2-3-113.	Programs that	receive tobacco	settlement mone	ys -

- 5 **program review.** (1) As used in this section:
- 6 (a) "HEALTH SCIENCES FACILITY" HAS THE MEANING SET FORTH IN
- 7 <u>SECTION 25-31-103, C.R.S. FOR PURPOSES OF THIS SECTION, "HEALTH</u>
- 8 <u>SCIENCES FACILITY" INCLUDES ANY CONTRACTOR OR SUBCONTRACTOR</u>
- 9 ENGAGED BY THE HEALTH SCIENCES FACILITY TO ASSIST IN THE
- 10 IMPLEMENTATION AND MONITORING OF THE NURSE HOME VISITOR
- 11 PROGRAM ESTABLISHED UNDER ARTICLE 31 OF TITLE 25, C.R.S.

1	(a) (b) "Master settlement agreement" means the master settlement
2	agreement, the smokeless tobacco master settlement agreement, and the
3	consent decree approved and entered by the court in the case denominated
4	<u>State of Colorado, ex rel. Gale A. Norton, Attorney General v. R.J.</u>
5	<u>Reynolds Tobacco Co.; American Tobacco Co., Inc.; Brown &</u>
6	<u>Williamson Tobacco Corp.; Liggett & Myers, Inc.; Lorillard Tobacco</u>
7	Co., Inc.; Philip Morris, Inc.; United States Tobacco Co.; B.A.T.
8	Industries, P.L.C.; The Council For Tobacco ResearchU.S.A., Inc.; and
9	Tobacco Institute, Inc., Case No. 97 CV 3432, in the district court for the
10	city and county of Denver.
11	(b) (c) "Tobacco settlement program" means any program that
12	receives appropriations from moneys received by the state pursuant to the
13	master settlement agreement.
14	(4) The joint budget committee staff, the legislative council staff,
15	the office of legislative legal services, and the department of public health
16	and environment, AND THE HEALTH SCIENCES FACILITY shall work with
17	the state auditor's office in conducting the program reviews and
18	evaluations of tobacco settlement programs.
19	SECTION 2. 25-1-108.5 (1), the introductory portion to
20	25-1-108.5 (2), and 25-1-108.5 (5), Colorado Revised Statutes, are
21	amended to read:
22	25-1-108.5. Additional powers and duties of state board of
23	health and department - programs that receive tobacco settlement
24	moneys - monitoring - annual report. (1) As used in this section:
25	(a) "HEALTH SCIENCES FACILITY" HAS THE MEANING SET FORTH IN
26	<u>SECTION 25-31-103.</u>
27	(a) (b) "Master settlement agreement" means the master settlement

1	agreement, the smokeless tobacco master settlement agreement, and the
2	consent decree approved and entered by the court in the case denominated
3	<u>State of Colorado, ex rel. Gale A. Norton, Attorney General v. R.J.</u>
4	<u>Reynolds Tobacco Co.; American Tobacco Co., Inc.; Brown &</u>
5	<u>Williamson Tobacco Corp.; Liggett & Myers, Inc.; Lorillard Tobacco</u>
6	<u>Co., Inc.; Philip Morris, Inc.; United States Tobacco Co.; B.A.T.</u>
7	Industries, P.L.C.; The Council For Tobacco ResearchU.S.A., Inc.; and
8	Tobacco Institute, Inc., Case No. 97 CV 3432, in the district court for the
9	city and county of Denver.
10	(c) "NURSE HOME VISITOR PROGRAM" MEANS THE TOBACCO
11	SETTLEMENT PROGRAM ESTABLISHED IN ARTICLE 31 OF THIS TITLE.
12	(b) (d) "Tobacco settlement program" means any program that
13	receives appropriations from moneys received by the state pursuant to the
14	master settlement agreement.
15	(2) EXCEPT FOR THE NURSE HOME VISITOR PROGRAM, WHICH
16	SHALL BE MONITORED BY THE HEALTH SCIENCES FACILITY IN ACCORDANCE
17	WITH SECTION 25-31-105 (1), the state board and the department shall
18	monitor the operation and effectiveness of tobacco settlement programs.
19	Each tobacco settlement program shall annually submit to the department,
20	in accordance with rules promulgated by the state board, the following
21	information:
22	(5) Each tobacco settlement program shall pay a proportionate
23	share of the costs incurred by the department in implementing the
24	requirements of this section, WITH the amount paid by each tobacco
25	settlement program shall be proportionate to the amounts annually
26	appropriated to each tobacco settlement program FROM THE MASTER
27	SETTLEMENT AGREEMENT; except that the total amount of the program

1	evaluation costs shall not exceed four-tenths of one percent of the total
2	amount of moneys received by the state pursuant to the master settlement
3	agreement in any fiscal year. For the fiscal year 2001-2002, seventy-five
4	thousand nine hundred seventy-eight dollars from the moneys paid to the
5	department from the tobacco settlement programs pursuant to this section
6	shall be appropriated to the stroke prevention and treatment cash fund
7	created in section 25-34-105 for allocation to the stroke advisory board
8	created in section 25-34-104 to cover the costs of such board's duties
9	pursuant to such section.
10	SECTION 3. 25-31-102, Colorado Revised Statutes, is amended
11	to read:
12	25-31-102. Legislative declaration. (1) The general assembly
13	hereby finds that, in order to adequately care for their newborns and
14	young children, new mothers may often benefit from receiving
15	professional assistance and information. Without such assistance and
16	information, a young mother may develop habits or practices that are
17	detrimental to her health and well-being and the health and well-being of
18	her child. The general assembly further finds that inadequate prenatal
19	care and inadequate care in infancy and early childhood often inhibit a
20	child's ability to learn and develop throughout his or her childhood and
21	may have lasting, adverse affects on the child's ability to function as an
22	adult. The general assembly recognizes that implementation of a nurse
23	home visitor program that provides educational, health, and other
24	resources for new young mothers during pregnancy and the first years of
25	their infants' lives has been proven to significantly reduce the amount of
26	drug, including nicotine, and alcohol use and abuse by mothers, the
27	occurrence of criminal activity committed by mothers and their children

1	under fifteen years of age, and the number of reported incidents of child
2	abuse and neglect. Such a program has also been proven to reduce the
3	number of subsequent births, increase the length of time between
4	subsequent births, and reduce the mother's need for other forms of public
5	assistance. It is the intent of the general assembly that such a program be
6	established for the state of Colorado, beginning with a limited number of
7	participants and expanding by the year 2010 to be available to all
8	low-income, first-time mothers in the state who consent to receiving
9	services.
10	(2) THE GENERAL ASSEMBLY FURTHER FINDS THAT, TO IMPLEMENT
11	SUCH A PROGRAM EFFICIENTLY AND EFFECTIVELY AND TO PROMOTE THE
12	SUCCESSFUL IMPLEMENTATION OF PARTNERSHIPS BETWEEN STATE PUBLIC
13	ENTITIES AND THE PRIVATE SECTOR, RESPONSIBILITY FOR THE PROGRAM
14	SHOULD BE DIVIDED BETWEEN THE DEPARTMENT, WHICH SHALL BE
15	RESPONSIBLE FOR FINANCIAL ADMINISTRATION OF THE PROGRAM, AND A
16	HEALTH SCIENCES FACILITY AT THE UNIVERSITY OF COLORADO, WHICH
17	SHALL BE RESPONSIBLE FOR PROGRAMMATIC AND CLINICAL SUPPORT,
18	EVALUATION, AND MONITORING FOR THE PROGRAM, AND SUCH OTHER
19	RESPONSIBILITIES AS DESCRIBED IN THIS ARTICLE. IT IS THE INTENT OF THE
20	GENERAL ASSEMBLY THAT THE DEPARTMENT AND THE HEALTH SCIENCES
21	CENTER WORK COLLABORATIVELY TO SHARE INFORMATION IN ORDER TO
22	PROMOTE EFFICIENT AND EFFECTIVE PROGRAM IMPLEMENTATION;
23	HOWEVER, NEITHER ENTITY IS RESPONSIBLE FOR THE OTHER ENTITY'S
24	STATUTORILY PRESCRIBED DUTIES.
25	SECTION 4. 25-31-103 (3), Colorado Revised Statutes, is
26	amended to read:
27	25-31-103. Definitions. As used in this article, unless the context

073

1 <u>otherwise requires:</u>

2	(3) "Health sciences facility" MEANS THE ANSCHUTZ MEDICAL
3	CAMPUS OR a SUCCESSOR facility located at the university of Colorado
4	health sciences center that is selected by the president of the university of
5	Colorado pursuant to section 25-31-105 to assist the state board in
6	administering the program.
7	SECTION 5. 25-31-104, Colorado Revised Statutes, is amended
8	BY THE ADDITION OF A NEW SUBSECTION to read:
9	25-31-104. Nurse home visitor program - created - rules.
10	(5) The department may propose to the state board rules
11	CONCERNING PROGRAM APPLICATIONS UNDER SECTION 25-31-106 (1).
12	ANY SUCH PROPOSAL SHALL BE MADE IN CONSULTATION WITH THE
13	HEALTH SCIENCES FACILITY.
14	SECTION 6. 25-31-105, Colorado Revised Statutes, is amended
15	to read:
16	25-31-105. Health sciences facility - duties. (1) The president
17	of the university of Colorado shall identify a facility at the university of
18	Colorado health sciences center with the knowledge and expertise
19	necessary to:
20	(a) Assist the state board in selecting entities from among the
21	applications submitted pursuant to section 25-31-106; and in monitoring
22	and evaluating the implementation of the program
23	(b) PROVIDE PROGRAMMATIC AND CLINICAL SUPPORT,
24	EVALUATION, AND MONITORING FOR THE PROGRAM, INCLUDING NURSE
25	PRACTICE SUPPORT AND TRAINING, CLINICAL AND PROGRAMMATIC
26	TECHNICAL ASSISTANCE, COMPLIANCE MONITORING AND SUPPORT,
20	

1	PERFORMANCE IMPROVEMENT MONITORING AND SUPPORT, in communities
2	throughout the state;
3	(c) COOPERATE WITH THE DEPARTMENT IN CONNECTION WITH THE
4	DEPARTMENT'S FINANCIAL ADMINISTRATION OF THE PROGRAM; AND
5	(d) WORK WITH THE STATE AUDITOR'S OFFICE AS REQUIRED IN
6	<u>SECTION 2-3-113 (4), C.R.S.</u>
7	(1.5) The Health sciences facility is not responsible for the
8	DUTIES ASSIGNED TO THE DEPARTMENT WITH RESPECT TO THE PROGRAM
9	<u>UNDER SECTION 25-31-107 (2) (a.5).</u>
10	(2) The health sciences facility shall monitor the administration
11	of the program by the selected entities PERFORM THE DUTIES SET FORTH
12	IN SUBSECTION (1) OF THIS SECTION to ensure that the program is
13	implemented AND OPERATED according to the program training
14	requirements, program protocols, program management information
15	systems, and program evaluation requirements established by rule of the
16	state board. The health sciences facility shall evaluate the overall
17	PROGRAM implementation, of the program OPERATION, AND
18	EFFECTIVENESS, and include such THAT evaluation, along with any
19	recommendations concerning the PROGRAM'S selected entities or changes
20	in the PROGRAM'S IMPLEMENTATION, OPERATION, AND EFFECTIVENESS,
21	INCLUDING program training requirements, program protocols, program
22	management information systems, or program evaluation requirements,
23	in the annual report submitted to the department pursuant to section
24	<u>25-31-108.</u>
25	(3) The department shall compensate the health sciences facility
26	for the HEALTH SCIENCES FACILITY'S ACTUAL costs incurred in performing
27	its duties under this article, AS DETERMINED BY THE HEALTH SCIENCES

1	FACILITY. SUCH DUTIES AND ACTUAL COSTS SHALL BE INCLUDED IN THE
2	SCOPE OF WORK IN THE AGREEMENT BETWEEN THE DEPARTMENT AND THE
3	HEALTH SCIENCES FACILITY FOR IMPLEMENTATION OF THOSE DUTIES AND
4	SHALL INCLUDE THE COSTS INCURRED BY ANY CONTRACTOR OR
5	SUBCONTRACTOR OF THE HEALTH SCIENCES FACILITY FOR THOSE DUTIES.
6	Such compensation shall be included in the actual costs incurred by the
7	department in administering the program and paid out of the amount
8	allocated to the department for administrative costs pursuant to section
9	25-31-107 (2) (b) for the health science facility's costs, in
10	ACCORDANCE WITH THE MAXIMUM ALLOCATION OF THREE PERCENT OF
11	THE AMOUNT ANNUALLY ALLOCATED FOR THE PROGRAM UNDER SECTION
12	<u>25-31-107 (2).</u>
13	SECTION 7. The introductory portion to 25-31-106(1), Colorado
14	Revised Statutes, is amended to read:
15	25-31-106. Program applications - requirements. (1) Any AN
16	entity that seeks to administer the program in a community shall submit
17	an application to the department in accordance with rules adopted by the
17 18	an application to the department in accordance with rules adopted by the state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH
18	state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH
18 19	state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH SCIENCES FACILITY. At a minimum, the application shall specify the basic
18 19 20	state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH SCIENCES FACILITY. At a minimum, the application shall specify the basic elements and procedures that the entity shall use in administering the
18 19 20 21	state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH SCIENCES FACILITY. At a minimum, the application shall specify the basic elements and procedures that the entity shall use in administering the program. Basic program elements shall include but are not limited to, the
18 19 20 21 22	state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH SCIENCES FACILITY. At a minimum, the application shall specify the basic elements and procedures that the entity shall use in administering the program. Basic program elements shall include but are not limited to, the following:
 18 19 20 21 22 23 	state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH SCIENCES FACILITY. At a minimum, the application shall specify the basic elements and procedures that the entity shall use in administering the program. Basic program elements shall include but are not limited to, the following: SECTION 8. 25-31-107 (2) (b), Colorado Revised Statutes, is
 18 19 20 21 22 23 24 	state board, IN CONSULTATION WITH THE DEPARTMENT AND THE HEALTH SCIENCES FACILITY. At a minimum, the application shall specify the basic elements and procedures that the entity shall use in administering the program. Basic program elements shall include but are not limited to, the following: SECTION 8. 25-31-107 (2) (b), Colorado Revised Statutes, is amended, and the said 25-31-107 (2) is further amended BY THE

1	AS OTHERWISE PROVIDED IN SECTION 25-31-108, THE DEPARTMENT SHALL
2	BE RESPONSIBLE FOR FINANCIAL ADMINISTRATION OF THIS ARTICLE, WHICH
3	SHALL INCLUDE COMPENSATING THE HEALTH SCIENCES FACILITY
4	PURSUANT TO SECTION 25-31-105 (3), PAYING GRANTS TO ENTITIES
5	SELECTED TO ADMINISTER THE PROGRAM, MONITORING FINANCIAL,
6	CONTRACTUAL, AND REGULATORY COMPLIANCE; PROVIDING MEDICAID
7	FINANCING OVERSIGHT; MANAGING ACCOUNTING AND BUDGETING; AND,
8	IN COOPERATION WITH THE HEALTH SCIENCES FACILITY, MANAGING GRANT
9	APPLICATIONS AS SET FORTH IN SECTION 25-31-106. THE DEPARTMENT
10	SHALL ALSO COOPERATE WITH THE HEALTH SCIENCES FACILITY'S
11	ADMINISTRATION OF PROGRAMMATIC AND CLINICAL SUPPORT,
12	EVALUATION, AND MONITORING OF THE PROGRAM. THE DEPARTMENT
13	SHALL NOT BE RESPONSIBLE FOR ANY DUTIES ASSIGNED TO THE HEALTH
14	SCIENCES FACILITY WITH RESPECT TO THE PROGRAM, AS DESCRIBED IN
15	<u>SECTION 25-31-105.</u>
16	(b) Grants awarded pursuant to paragraph (a) of this subsection
17	(2) shall be payable from the nurse home visitor program fund, which
18	fund is hereby created in the state treasury. The nurse home visitor
19	program fund, referred to in this section as the "fund", shall BE
20	ADMINISTERED BY THE DEPARTMENT AND SHALL consist of moneys
21	transferred thereto by the state treasurer from moneys received pursuant
22	to the master settlement agreement in the amount described in paragraph
23	(d) of this subsection (2). In addition, the state treasurer may SHALL
24	credit to the fund any public or private gifts, grants, or donations received
25	by the department for implementation of the program, INCLUDING ANY
26	MONEYS RECEIVED FROM THE UNITED STATES FEDERAL GOVERNMENT FOR
27	THE PROGRAM. The fund shall be subject to annual appropriation by the

1	general assembly to the department for grants to entities for operation of
2	the program. In addition, The department may retain A TOTAL OF up to
3	five percent of the amount annually appropriated from the fund for the
4	actual costs incurred by the department in implementing the provisions of
5	this article PROGRAM, IN ORDER TO COMPENSATE THE HEALTH SCIENCES
6	FACILITY PURSUANT TO SECTION 25-31-105 (3), AS SET FORTH IN THE
7	SCOPE OF WORK IN THE AGREEMENT BETWEEN THE DEPARTMENT AND THE
8	HEALTH SCIENCES FACILITY, AND TO COMPENSATE THE DEPARTMENT FOR
9	THE ACTUAL COSTS INCURRED BY THE DEPARTMENT IN IMPLEMENTING THE
10	PROVISIONS OF PARAGRAPH (a.5) OF THIS SUBSECTION (2), AS DETERMINED
11	BY THE DEPARTMENT; EXCEPT THAT THE PORTION OF THE COSTS TO
12	COMPENSATE THE DEPARTMENT FOR IMPLEMENTING THE PROVISIONS OF
13	PARAGRAPH (a.5) OF THIS SUBSECTION (2) SHALL NOT EXCEED TWO
14	PERCENT OF THE AMOUNT ANNUALLY APPROPRIATED FROM THE FUND FOR
15	THE PROGRAM, AND THE PORTION OF SUCH COSTS TO COMPENSATE THE
16	HEALTH SCIENCES FACILITY UNDER SECTION 25-31-105 (3), AS SET FORTH
17	IN THE SCOPE OF WORK IN THE CONTRACT BETWEEN THE DEPARTMENT AND
18	THE HEALTH SCIENCES FACILITY, SHALL NOT EXCEED THREE PERCENT OF
19	THE AMOUNT ANNUALLY APPROPRIATED FROM THE FUND FOR THE
20	PROGRAM. IN ADDITION, IF THE TOTAL AMOUNT ANNUALLY APPROPRIATED
21	FROM THE FUND FOR THE PROGRAM EXCEEDS NINETEEN MILLION DOLLARS,
22	THE DEPARTMENT AND THE HEALTH SCIENCES FACILITY SHALL ASSESS
23	WHETHER A SMALLER PERCENTAGE OF THE APPROPRIATED FUNDS
24	EXCEEDING NINETEEN MILLION DOLLARS IS ADEQUATE TO COVER THEIR
25	ACTUAL COSTS AND SHALL JOINTLY SUBMIT TO THE GENERAL ASSEMBLY
26	<u>A REPORT ARTICULATING THEIR CONCLUSIONS ON THIS SUBJECT. THE</u>
27	ACTUAL COSTS OF THE DEPARTMENT INCLUDE DEPARTMENT PERSONNEL

1	AND OPERATING COSTS AND ANY NECESSARY TRANSFERS TO THE
2	DEPARTMENT OF HEALTH CARE POLICY AND FINANCING FOR
3	ADMINISTRATIVE COSTS INCURRED FOR THE MEDICAID PROGRAM
4	ASSOCIATED WITH THE PROGRAM. THE ACTUAL COSTS OF THE HEALTH
5	SCIENCES FACILITY INCLUDE THE FACILITY'S OWN ACTUAL PROGRAM
6	COSTS AND THOSE OF ITS CONTRACTORS AND SUBCONTRACTORS. ANY
7	COSTS FOR TIME STUDIES REQUIRED TO OBTAIN MEDICAID REIMBURSEMENT
8	FOR THE PROGRAM MAY BE PAID FROM PROGRAM FUNDS, AND SHALL NOT
9	BE SUBJECT TO THE FIVE PERCENT LIMIT IN THIS SECTION. Notwithstanding
10	the provisions of section 24-36-114, C.R.S., all interest derived from the
11	deposit and investment of moneys in the fund shall be credited to the
12	fund. Any unencumbered moneys appropriated from moneys received
13	pursuant to the master settlement agreement remaining in the fund at the
14	· · · · · · · · · · · · · · · · · · ·
14	end of any fiscal year shall be transferred to the tobacco litigation
14 15	end of any fiscal year shall be transferred to the tobacco litigation settlement trust fund created in section 24-22-115.5, C.R.S.
	settlement trust fund created in section 24-22-115.5, C.R.S.
15	
15 16	settlement trust fund created in section 24-22-115.5, C.R.S. SECTION 9. 25-31-108 (1), Colorado Revised Statutes, is
15 16 17	settlement trust fund created in section 24-22-115.5, C.R.S. SECTION 9. 25-31-108 (1), Colorado Revised Statutes, is amended to read: 25-31-108. Annual program review - audit. (1) The health
15 16 17 18	settlement trust fund created in section 24-22-115.5, C.R.S. SECTION 9. 25-31-108 (1), Colorado Revised Statutes, is amended to read:
15 16 17 18 19	settlement trust fund created in section 24-22-115.5, C.R.S. SECTION 9. 25-31-108 (1), Colorado Revised Statutes, is amended to read: 25-31-108. Annual program review - audit. (1) The health sciences facility shall annually prepare and submit to the department a
15 16 17 18 19 20	settlement trust fund created in section 24-22-115.5, C.R.S.SECTION 9. 25-31-108 (1), Colorado Revised Statutes, isamended to read:25-31-108. Annual program review - audit. (1) The healthsciences facility shall annually prepare and submit to the department areport including an evaluation of the implementation of the program, the
15 16 17 18 19 20 21	settlement trust fund created in section 24-22-115.5, C.R.S.SECTION 9. 25-31-108 (1), Colorado Revised Statutes, isamended to read:25-31-108. Annual program review - audit. (1) The healthsciences facility shall annually prepare and submit to the department areport including an evaluation of the implementation of the program, theresults achieved by the program based on the annual reports submitted by
15 16 17 18 19 20 21 22	settlement trust fund created in section 24-22-115.5, C.R.S. SECTION 9. 25-31-108 (1), Colorado Revised Statutes, is amended to read: 25-31-108. Annual program review - audit. (1) The health sciences facility shall annually prepare and submit to the department a report including an evaluation of the implementation of the program, the results achieved by the program based on the annual reports submitted by the administering entities pursuant to section 25-31-106 (1) (e), the extent
 15 16 17 18 19 20 21 22 23 	settlement trust fund created in section 24-22-115.5, C.R.S. SECTION 9. 25-31-108 (1), Colorado Revised Statutes, is amended to read: 25-31-108. Annual program review - audit. (1) The health sciences facility shall annually prepare and submit to the department a report including an evaluation of the implementation of the program, the results achieved by the program based on the annual reports submitted by the administering entities pursuant to section 25-31-106 (1) (e), the extent to which the program serves medicaid-eligible persons and provides
 15 16 17 18 19 20 21 22 23 24 	settlement trust fund created in section 24-22-115.5, C.R.S. SECTION 9. 25-31-108 (1), Colorado Revised Statutes, is amended to read: 25-31-108. Annual program review - audit. (1) The health sciences facility shall annually prepare and submit to the department a report including an evaluation of the implementation of the program, the results achieved by the program based on the annual reports submitted by the administering entities pursuant to section 25-31-106 (1) (e), the extent to which the program serves medicaid-eligible persons and provides services that may be provided in part through medicaid funding, and any

1	in the annual report on programs that are funded by moneys received
2	pursuant to the master settlement agreement THE PROGRAM prepared
3	pursuant to section 25-1-108.5 (3). EACH PROGRAM CONTRACTOR AND
4	SUBCONTRACTOR AND EACH ENTITY THAT ADMINISTERS THE PROGRAM
5	SHALL WORK WITH THE HEALTH SCIENCES FACILITY AND THE DEPARTMENT
6	TO PREPARE THE REPORTS REQUIRED UNDER THIS SECTION AND SECTIONS
7	<u>2-3-113 (2) AND 25-1-108.5 (3), C.R.S. Any entity that is administering</u>
8	the program may be IS subject to a reduction in or cessation of funding if
9	the state board, based on recommendations from the health sciences
10	facility, determines that the entity is not operating the program in
11	accordance with the program requirements established by rule of the state
12	board or is operating the program in such a manner that the program does
13	not demonstrate positive results.
13 14	<u>not demonstrate positive results.</u> <u>SECTION 10. Adjustment to the 2010 long bill.</u> For the
14	SECTION 10. Adjustment to the 2010 long bill. For the
14 15	SECTION 10. Adjustment to the 2010 long bill. For the implementation of this act, the appropriation made in the annual general
14 15 16	SECTION 10. Adjustment to the 2010 long bill. For the implementation of this act, the appropriation made in the annual general appropriation act, for the fiscal year beginning July 1, 2010, to the
14 15 16 17	SECTION 10. Adjustment to the 2010 long bill. For the implementation of this act, the appropriation made in the annual general appropriation act, for the fiscal year beginning July 1, 2010, to the department of public health and environment, prevention services
14 15 16 17 18	SECTION 10. Adjustment to the 2010 long bill. For the implementation of this act, the appropriation made in the annual general appropriation act, for the fiscal year beginning July 1, 2010, to the department of public health and environment, prevention services division, family and community health, child, adolescent, and school
14 15 16 17 18 19	SECTION 10. Adjustment to the 2010 long bill. For the implementation of this act, the appropriation made in the annual general appropriation act, for the fiscal year beginning July 1, 2010, to the department of public health and environment, prevention services division, family and community health, child, adolescent, and school health, nurse home visitor program, is reduced by 1.0 FTE.
14 15 16 17 18 19 20	SECTION 10. Adjustment to the 2010 long bill. For the implementation of this act, the appropriation made in the annual general appropriation act, for the fiscal year beginning July 1, 2010, to the department of public health and environment, prevention services division, family and community health, child, adolescent, and school health, nurse home visitor program, is reduced by 1.0 FTE. SECTION 11. Effective date. This act shall take effect June 30,
14 15 16 17 18 19 20 21	SECTION 10. Adjustment to the 2010 long bill. For the implementation of this act, the appropriation made in the annual general appropriation act, for the fiscal year beginning July 1, 2010, to the department of public health and environment, prevention services division, family and community health, child, adolescent, and school health, nurse home visitor program, is reduced by 1.0 FTE. SECTION 11. Effective date. This act shall take effect June 30, 2010.