First Regular Session Seventy-third General Assembly STATE OF COLORADO

REVISED

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

LLS NO. 21-0371.02 Christy Chase x2008

SENATE BILL 21-094

SENATE SPONSORSHIP

Ginal and Winter, Buckner, Fields, Jaquez Lewis, Kirkmeyer, Simpson, Pettersen

HOUSE SPONSORSHIP

Roberts and Ortiz,

Senate Committees

Health & Human Services Appropriations

House Committees

Health & Insurance Finance Appropriations

A BILL FOR AN ACT

101	CONCERNING THE CONTINUATION OF THE STATE BOARD OF
102	PHARMACY, AND, IN CONNECTION THEREWITH, IMPLEMENTING
103	RECOMMENDATIONS CONTAINED IN THE 2020 SUNSET REPORT
104	BY THE DEPARTMENT OF REGULATORY AGENCIES AND MAKING
105	OTHER CHANGES REGARDING THE PRACTICE OF PROFESSIONS
106	REGULATED BY THE BOARD.

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/.)

Sunset Process - Senate Health and Human Services

SENATE d Reading Unamended April 28, 2021

SENATE Amended 2nd Reading April 27, 2021

Shading denotes HOUSE amendment.

Capital letters or bold & italic numbers indicate new material to be added to existing statute.

Dashes through the words indicate deletions from existing statute.

Committee. The bill implements recommendations of the department of regulatory agencies in its sunset review of and report on the state board of pharmacy (board) and its regulation of the practice of pharmacy and makes other modifications to the laws regulating the practice. Specifically:

- Sections 1 and 2 of the bill continue the board and its functions for 9 years, until 2030, and consolidate within the sunset review the board's functions regarding the regulation of therapeutic interchange and therapeutically equivalent selections and of collaborative pharmacy practice agreements;
- Sections 3, 9, 10, 11, 18, 20, and 25 to 29 align the pharmacy practice act with the federal "Drug Quality and Security Act";
- Section 3 also:
 - Clarifies that an out-of-state pharmacy need not register with the board when distributing prescription drugs to in-state pharmacies under common ownership with the out-of-state pharmacy if the drugs remain in the original manufacturer's packaging and are not compounded and the transfer is necessary to address an inventory shortage;
 - Excludes from the definition of "compounding" activities such as repackaging or tablet splitting a drug or adding standard flavoring to oral liquid drugs;
 - Includes in the definition of "other outlet" a community mental health clinic and a facility operating a licensed substance use disorder treatment program, thereby allowing those facilities to register with the board and operate as a pharmacy outlet;
 - Repeals the term "pharmaceutical care" and replaces it with "pharmacist care services" to reflect the services pharmacists provide in addition to compounding and dispensing drugs;
 - Adds functions to the scope of practice of a pharmacy technician, such as documenting medical history and replenishing automated dispensing devices; and
 - Adds functions to the scope of practice of a pharmacist, such as prescribing drugs for limited conditions, ordering and evaluating laboratory tests, and performing limited physical assessments;
- Section 4 specifies that, of the pharmacist members of the

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- board, one must be practicing in a hospital setting, one must be practicing in a chain pharmacy, and one must be practicing in an independent pharmacy;
- Section 5 repeals the requirement that the board justify its reasons for deviating from a recommendation from the veterinary pharmaceutical advisory committee;
- Sections 5, 6, 21 to 25, and 36 make technical amendments to the pharmacy practice act, such as eliminating references to "diversion" in the peer health assistance program and correcting erroneous references to wholesalers as "licensed" rather than "registered";
- Section 6 grants the board authority, after conducting a risk-based assessment, to inspect out-of-state pharmacies, out-of-state wholesalers, and nonresident 503B outsourcing facilities and requires the board to send quarterly electronic newsletters to pharmacists regarding updates in the law that affect the practice;
- Sections 7, 16, and 33 to 35 require pharmacists and pharmacies, as well as insurance companies that underwrite professional liability insurance for pharmacists and pharmacies, to report malpractice settlements and judgments to the board;
- Section 8 specifies tasks that a pharmacist may delegate to ancillary pharmacy personnel under the pharmacist's supervision;
- Section 10 increases the amount of medication that may be dispensed to an emergency room patient from a 24-hour supply to a 72-hour supply and allows a hospital to dispense a prescription drug to a hospitalized patient who leaves the hospital on a day pass;
- Sections 3, 12, and 32 authorize pharmacists to prescribe opiate antagonists;
- Sections 3 and 13 repeal the requirement that the label on an anabolic steroid prescription indicate the purpose for which the prescription was written;
- Sections 3 and 14 authorize a pharmacist, under specified circumstances, to substitute a drug in the same therapeutic class as the prescribed drug or a biological product that is a biosimilar to the prescribed biological product;
- Section 15 authorizes pharmacists to make specified types of minor adaptions to prescriptions;
- **Section 16** specifies that a licensee, certificant, or registrant may be disciplined for habitual or excessive use or abuse of alcohol, habit-forming drugs, or controlled substances, but not for having a substance use disorder;

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- **Section 17** eliminates the requirement that the board send letters of admonition by certified mail;
- Section 19 directs the board to adopt rules regarding electronic storage of pharmacy records;
- Section 20 requires a pharmacist to provide patient counseling in new medication therapy and authorizes a pharmacist, in the pharmacist's professional judgment, to provide patient counseling for any other prescription; and
- Sections 30 and 31 allow a pharmacy technician to register with and access, on behalf of a pharmacist supervising the pharmacy technician, the prescription drug monitoring program.

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

2 **SECTION 1.** In Colorado Revised Statutes, 12-280-104, amend

3 (3) as follows:

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4 12-280-104. State board of pharmacy - creation - subject to

5 review - repeal of parts. (3) Parts 1 to 3 Parts 1 to 3, 5, AND 6 of this

article 280 are repealed, effective September 1, 2021 SEPTEMBER 1, 2030.

7 Before the repeal, the board and the regulation of the practice of

pharmacy pursuant to parts 1 to 3 PARTS 1 TO 3, 5, AND 6 of this article

280 including the regulation of the practice as a pharmacy technician, are

scheduled for review in accordance with section 24-34-104.

SECTION 2. In Colorado Revised Statutes, 24-34-104, **repeal** (21)(a)(II); and **add** (31)(a)(VI) as follows:

24-34-104. General assembly review of regulatory agencies and functions for repeal, continuation, or reestablishment - legislative declaration - repeal. (21) (a) The following agencies, functions, or both, will repeal on September 1, 2021:

(II) The state board of pharmacy and the regulation of the practice of pharmacy, including the regulation of the practice as a pharmacy technician, by the department of regulatory agencies through the division

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1	of professions and occupations in accordance with parts 1 to 3 of article
2	280 of title 12;
3	(31) (a) The following agencies, functions, or both, are scheduled
4	for repeal on September 1, 2030:
5	(VI) THE STATE BOARD OF PHARMACY AND THE REGULATION OF
6	THE PRACTICE OF PHARMACY IN ACCORDANCE WITH PARTS 1 TO 3, 5, AND
7	6 of article 280 of title 12.
8	SECTION 3. In Colorado Revised Statutes, 12-280-103, amend
9	(3), (4), (27), (32)(a) introductory portion, (38.5)(a)(V), (38.5)(a)(VI),
10	(39)(a), (39)(d), (40), (43), (48), (54)(b)(III), (54)(b)(XI), and (55); repeal
11	(9), (34), (37), (54)(b)(IX), and (54)(b)(XII); and add (9.7),
12	(15.5), (28.5), (35.5), (38.5)(a)(VII), (38.5)(a)(VIII), (39)(f), (39)(g),
13	(39)(h), (39)(i), (39)(j), (39)(k), (46.5), (52.5), and (54)(b)(XVI) as
14	follows:
15	12-280-103. Definitions - rules. As used in this article 280, unless
16	the context otherwise requires or the term is otherwise defined in another
17	part of this article 280:
18	(3) "Anabolic steroid" has the same meaning as set forth in section
19	18-18-102 (3) "APPROVED TREATMENT FACILITY" MEANS AN APPROVED
20	PRIVATE OR PUBLIC TREATMENT FACILITY, AS DESCRIBED IN SECTION
21	27-81-102 (2) AND (3) THAT ADHERES TO THE STANDARDS SET FORTH IN
22	<u>SECTION 27-81-106.</u>
23	(4) "Authorized distributor of record" means a wholesaler with
24	whom a manufacturer has established an ongoing relationship to
25	distribute the manufacturer's prescription drug. For purposes of this
26	subsection (4), an ongoing relationship is deemed to exist between a
2.7	wholesaler and a manufacturer when the wholesaler including any

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1	arrinated group of the wholesaler as defined in section 1504 of the redefar
2	"Internal Revenue Code of 1986", as amended, complies with the
3	following:
4	(a) The wholesaler has a written agreement currently in effect
5	with the manufacturer evidencing the ongoing relationship; and
6	(b) The wholesaler is listed on the manufacturer's current list of
7	authorized distributors of record, which list is updated by the
8	manufacturer on no less than a monthly basis "Behavioral health
9	ENTITY" MEANS A BEHAVIORAL HEALTH ENTITY, AS DEFINED IN SECTION
10	25-27.6-102 (6), LICENSED PURSUANT TO ARTICLE 27.6 OF TITLE 25.
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12	(9) "Chain pharmacy warehouse" means a physical location for
13	prescription drugs that serves as a central warehouse and performs
14	intracompany sales or transfers of prescription drugs to a group of chain
15	pharmacies or other chain pharmacy warehouses that are under common
16	ownership or control. Notwithstanding any other provision of this article
17	280, a chain pharmacy warehouse receiving distributions on behalf of, or
18	making distributions to, an intracompany pharmacy need not be an
19	authorized distributor of record to be part of the normal distribution
20	channel.
21	(9.7) "COMMUNITY MENTAL HEALTH CLINIC" HAS THE SAME
22	MEANING AS SET FORTH IN SECTION 25-27.6-102 (9).
23	
24	(15.5) "DQSA" MEANS THE FEDERAL "DRUG QUALITY AND
25	SECURITY ACT", Pub.L. 113-54, as amended.
26	(27) "Manufacturer's exclusive distributor" means a person who
27	contracts with a manufacturer to provide or coordinate warehousing,

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distribution, or other services on behalf of a manufacturer and who takes title to the manufacturer's prescription drug but who does not have general responsibility to direct the sale or disposition of the manufacturer's prescription drug. To be considered part of the normal distribution channel, as defined in section 12-280-301 (6), a manufacturer's exclusive distributor shall be an authorized distributor of record "Manufacturer" or "Manufacturing drug outlet" means a person who manufactures drugs and includes a resident 503B outsourcing facility.

(28.5) "Nonresident 503B outsourcing facility" means a facility that is registered by the FDA, that is located outside the state, and that distributes compounded drugs into the state

(32) "Other outlet" means:

WITHOUT A PRESCRIPTION ORDER.

(a) A hospital that does not operate a registered pharmacy, a rural health clinic, a federally qualified health center, as defined in the federal "Social Security Act", 42 U.S.C. sec. 1395x (aa)(4), a family planning clinic, an acute treatment unit licensed by the department of public health and environment, a school, a jail, a county or district public health agency, a community health clinic, A COMMUNITY MENTAL HEALTH CLINIC, A BEHAVIORAL HEALTH ENTITY, AN APPROVED TREATMENT FACILITY, a university, or a college that:

(34) "Pharmaceutical care" means the provision of drug therapy and other pharmaceutical patient care services by a pharmacist intended to achieve outcomes related to the cure or prevention of a disease, elimination or reduction of a patient's symptoms, or arresting or slowing of a disease process. In addition to the preparation, dispensing, and

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distribution of medications, "pharmaceutical care" may include assessment and evaluation of the patient's medication-related needs and development and communication of a therapeutic plan with defined outcomes in consultation with the patient and the patient's other health-care professionals to attain the desired outcome. This function includes efforts to prevent, detect, and resolve medication-related problems for individual patients. "Pharmaceutical care" does not include prescriptive authority; except that a pharmacist may prescribe only over-the-counter medications to a recipient under the "Colorado Medical Assistance Act" as authorized pursuant to section 25.5-5-322 or pursuant to a collaborative pharmacy practice agreement as defined in section 12-280-601 (1)(b).

- (35.5) "PHARMACIST CARE SERVICES" MEANS PATIENT CARE ACTIVITIES PROVIDED BY A PHARMACIST, WITH OR WITHOUT DISPENSING A DRUG, THAT ARE INTENDED TO ACHIEVE OUTCOMES RELATED TO CURING OR PREVENTING DISEASE, ELIMINATING OR REDUCING A PATIENT'S SYMPTOMS, OR ARRESTING OR SLOWING THE PROCESS OF A DISEASE. "PHARMACIST CARE SERVICES" INCLUDES EFFORTS TO PREVENT, DETECT, AND RESOLVE MEDICATION-RELATED PROBLEMS.
- (37) "Pharmacy buying cooperative warehouse" means a permanent physical location that acts as a central warehouse for prescription drugs and from which sales of prescription drugs are made to an exclusive group of pharmacies that are members or member owners of the buying cooperative operating the warehouse.
- (38.5) (a) "Practice as a pharmacy technician" means engaging in any of the following activities involved in the practice of pharmacy, under the supervision and delegation of a supervising pharmacist:

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1	(V) Transferring prescriptions; and
2	(VI) Other activities as authorized and defined by the board by
3	rule Gathering, documenting, and maintaining proper clinical
4	AND NONCLINICAL INFORMATION FROM PATIENTS;
5	(VII) REPLENISHING AUTOMATED DISPENSING DEVICES WITHOUT
6	THE NEED FOR PHARMACIST VERIFICATION AS LONG AS THE PHARMACY
7	TECHNICIAN USES BAR CODE TECHNOLOGY THAT CHECKS THE ACCURACY
8	OF THE MEDICATION OR A SECOND PHARMACY TECHNICIAN PERFORMS THE
9	VERIFICATION; AND
10	(VIII) OTHER ACTIVITIES AS AUTHORIZED AND DEFINED BY THE
11	BOARD BY RULE.
12	(39) "Practice of pharmacy" means:
13	(a) The interpretation, evaluation, implementation, and dispensing
14	of orders; participation in drug and device selection, drug administration,
15	drug regimen reviews, and drug or drug-related research; THE provision
16	of patient counseling; and the provision of those acts or services
17	necessary to provide pharmaceutical PHARMACIST care SERVICES in all
18	areas of patient care;
19	(d) The dispensing of chronic maintenance drugs pursuant to
20	section 12-280-125.5 and board rules adopted in accordance with that
21	section; and
22	$(f) \ Providing \ care \ to \ patients \ pursuant \ to \ a \ collaborative$
23	PHARMACY PRACTICE AGREEMENT AS DEFINED IN SECTION 12-280-601;
24	(g) EXERCISING INDEPENDENT PRESCRIPTIVE AUTHORITY:
25	(I) AS AUTHORIZED PURSUANT TO SECTION 25.5-5-322, ONLY WITH
26	REGARD TO OVER-THE-COUNTER MEDICATIONS PRESCRIBED TO RECIPIENTS
27	UNDER THE "COLORADO MEDICAL ASSISTANCE ACT", ARTICLES 4 TO 6 OF

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1	TITLE 25.5;
2	(II) IN ACCORDANCE WITH A COLLABORATIVE PHARMACY
3	PRACTICE AGREEMENT AS DEFINED IN SECTION 12-280-601 (1)(b);
4	(III) AS AUTHORIZED PURSUANT TO SECTIONS 12-30-110 AND
5	12-280-123 (3) REGARDING OPIATE ANTAGONISTS; OR
6	(IV) For <u>drugs that are not controlled substances</u> , drug
7	CATEGORIES, OR DEVICES THAT ARE PRESCRIBED IN ACCORDANCE WITH
8	THE PRODUCT'S FDA -APPROVED LABELING AND TO PATIENTS WHO ARE AT
9	LEAST TWELVE YEARS OF AGE AND THAT ARE LIMITED TO CONDITIONS
10	THAT:
11	(A) DO NOT REQUIRE A NEW DIAGNOSIS;
12	(B) ARE MINOR AND GENERALLY SELF-LIMITING; OR
13	(C) HAVE A TEST THAT IS USED TO GUIDE DIAGNOSIS OR CLINICAL
14	DECISION-MAKING AND IS WAIVED UNDER THE FEDERAL "CLINICAL
15	LABORATORY IMPROVEMENT AMENDMENTS OF 1988", Pub.L. 100-578
16	AS AMENDED;
17	(h) ORDERING AND EVALUATING LABORATORY TESTS AS RELATED
18	TO MEDICATION THERAPY;
19	(i) PERFORMING LIMITED PHYSICAL ASSESSMENTS COMMENSURATE
20	WITH EDUCATION AND TRAINING;
21	(j) Performing other tasks delegated by a licensed
22	PHYSICIAN; AND
23	(k) Providing treatment that is based on national
24	EVIDENCE-BASED, PUBLISHED GUIDANCE.
25	(40) "Practitioner" means a person authorized by law to prescribe
26	any drug or device, acting within the scope of the authority, including a
27	pharmacist who is participating within the parameters of a statewide drug

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therapy protocol pursuant to a collaborative pharmacy practice agreement as defined in section 12-280-601 (1)(b), or prescribing over-the-counter medications pursuant to section 25.5-5-322, OR PRESCRIBING AN OPIATE ANTAGONIST PURSUANT TO SECTIONS 12-30-110 AND 12-280-123 (3).

- (43) "Prescription drug outlet" or "pharmacy" means any pharmacy outlet registered pursuant to this article 280 where prescriptions are compounded and dispensed. "Prescription drug outlet" includes, without limitation, a compounding prescription drug outlet registered pursuant to section 12-280-119 (9) or specialized prescription drug outlet registered pursuant to section 12-280-119 (11).
- (46.5) "RESIDENT 503B OUTSOURCING FACILITY" MEANS A FACILITY THAT IS REGISTERED BY THE FDA, THAT IS LOCATED IN THE STATE, AND THAT DISTRIBUTES COMPOUNDED DRUGS WITHIN THE STATE.
- (48) "Satellite" means an area outside the prescription drug outlet where pharmaceutical care and PHARMACIST CARE services are provided and that is in the same location.
- (52.5) "THIRD-PARTY LOGISTICS PROVIDER" MEANS A PERSON THAT CONTRACTS WITH A MANUFACTURER TO PROVIDE OR COORDINATE WAREHOUSING, DISTRIBUTION, OR OTHER SERVICES ON BEHALF OF A MANUFACTURER BUT DOES NOT TAKE TITLE TO A PRESCRIPTION DRUG OR HAVE GENERAL RESPONSIBILITY TO DIRECT THE PRESCRIPTION DRUG'S SALE OR DISPOSITION.
- (54) (b) "Wholesale distribution" does not include:
 - (III) The sale or transfer of a PRESCRIPTION drug THAT IS NOT COMPOUNDED OR PREPACKAGED BY THE SELLING OR TRANSFERRING PHARMACY, EXCEPT AS ALLOWED PURSUANT TO SECTION 12-280-120 (15)(b), for medical reasons by a retail AN IN-STATE OR UNREGISTERED

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1	NONRESIDENT pharmacy to another retail A SEPARATE IN-STATE pharmacy
2	UNDER COMMON OWNERSHIP WITH THE SELLING OR TRANSFERRING
3	IN-STATE OR UNREGISTERED NONRESIDENT PHARMACY to alleviate a
4	temporary shortage;
5	(IX) The direct sale, purchase, distribution, trade, or transfer of a
6	prescription drug from a manufacturer to an authorized distributor of
7	record to one additional authorized distributor of record but only if an
8	authorized distributor of record that purchases a prescription drug from
9	an authorized distributor of record that purchased the prescription drug
10	directly from the manufacturer:
11	(A) Provides the supplying authorized distributor of record with
12	a verifiable statement that the product is unavailable from the
13	manufacturer; and
14	(B) Receives a verifiable statement from the supplying authorized
15	distributor of record that the product was purchased directly from the
16	manufacturer;
17	(XI) The sale or transfer from a retail pharmacy or chain
18	pharmacy warehouse of expired, damaged, returned, or recalled
19	prescription drugs to the original manufacturer or to a third-party returns
20	processor;
21	(XII) The sale or transfer of compounded drugs compounded by
22	a retail pharmacy as defined in subsection (10) of this section and as
23	authorized by section 12-280-120 (6)(b);
24	(XVI) THE SALE, PURCHASE, OR TRADE OF A DRUG OR AN OFFER TO
25	SELL, PURCHASE, OR TRADE A DRUG BY A CHARITABLE ORGANIZATION
26	DESCRIBED IN SECTION 501 (c)(3) OF THE FEDERAL "INTERNAL REVENUE
27	Code of 1986", as amended, to a nonprofit affiliate of the

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1	ORGANIZATION TO THE EXTENT OTHERWISE PERMITTED BY LAW.
2	(55) "Wholesaler" means a person engaged in the wholesale
3	distribution of prescription drugs to persons, other than consumers, who
4	are entitled THAT ARE AUTHORIZED BY LAW to possess prescription drugs.
5	including: Repackagers; own-label distributors; private-label distributors;
6	jobbers; brokers; warehouses, including manufacturers' and distributors'
7	warehouses; manufacturers' exclusive distributors; authorized distributors
8	of record; drug wholesalers or distributors; independent wholesale drug
9	traders; pharmacy buying cooperative warehouses; retail pharmacies that
10	conduct wholesale distribution; and chain pharmacy warehouses that
11	conduct wholesale distribution.
12	SECTION 4. In Colorado Revised Statutes, 12-280-105, amend
13	(1)(a), (1)(b), and (1)(c)(II) as follows:
14	12-280-105. Membership of board - removal - compensation
15	- meetings - repeal. (1) (a) (I) The board is composed of five licensed
16	pharmacists, each having at least five years' experience in this state and
17	actively engaged in the practice of pharmacy in this state, and two
18	nonpharmacists who have no financial interest in the practice of
19	pharmacy.
20	(II) OF THE LICENSED PHARMACIST MEMBERS OF THE BOARD, ONE
21	MUST BE ENGAGED IN PRACTICE IN A HOSPITAL SETTING, ONE MUST BE
22	ENGAGED IN PRACTICE IN A CHAIN PHARMACY, AND ONE MUST BE
23	ENGAGED IN PRACTICE IN AN INDEPENDENT PHARMACY.
24	(b) (I) The governor shall make all appointments to the board in
25	accordance with this section.
26	(II) (A) For the licensed pharmacist members of the board
27	whose terms expire on July 1, 2021, and July 1, 2022, the governor

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1	SHALL APPOINT LICENSED PHARMACIST MEMBERS THAT SATISFY THE
2	REQUIREMENTS OF SUBSECTION (1)(a)(II) OF THIS SECTION.
3	(B) This subsection (1)(b)(II) is repealed, effective
4	DECEMBER 31, 2022.
5	(c) For purposes of achieving a balance in the membership on the
6	board, the governor shall consider:
7	(II) The type of practice of the appointee so that various types of
8	practices are represented on the board AND SO THAT THE LICENSED
9	PHARMACIST MEMBERS OF THE BOARD SATISFY THE REQUIREMENTS OF
10	SUBSECTION (1)(a)(II) OF THIS SECTION.
11	SECTION 5. In Colorado Revised Statutes, 12-280-106, amend
12	(1)(a)(I)(B) and (2)(c) as follows:
13	12-280-106. Veterinary pharmaceutical advisory committee
14	- creation - appointments - rules - repeal. (1) (a) (I) There is created in
15	the department the veterinary pharmaceutical advisory committee
16	comprised of three members, each appointed by the state veterinarian who
17	serves under the commissioner of agriculture pursuant to section
18	35-50-104 as follows:
19	(B) One member who is either a licensed pharmaceutical
20	wholesaler registered pursuant to part 3 of this article 280
21	engaged in the distribution of animal drugs, having at least five years'
22	experience in this state, in good standing, and actively engaged in the
23	practice of wholesale pharmacy or a licensed veterinarian, having at least
24	five years' experience in this state, in good standing, and actively engaged
25	in the practice of veterinary medicine, but who is not both a
26	pharmaceutical wholesaler and a veterinarian; and
27	(2) (c) The board shall adopt the advisory committee's

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1	recommendation on a referred matter unless the board determines that
2	there exists material and substantial evidence or information related to the
3	matter that warrants a resolution of the matter that is distinct from the
4	advisory committee's recommendation. If the board deviates from the
5	advisory committee's recommendation, the board shall make a record of
6	the reasons for the deviation.
7	SECTION 6. In Colorado Revised Statutes, 12-280-108, amend
8	(1)(a) and (1)(j); and add (1)(k) as follows:
9	12-280-108. Powers and duties - rules. (1) The board shall:
10	(a) (I) Inspect, or direct inspectors who are licensed pharmacists
11	to inspect, all outlets and investigate violations of this article 280.
12	(II) THE BOARD'S AUTHORITY UNDER THIS SUBSECTION (1)(a) TO
13	INSPECT ALL OUTLETS INCLUDES THE AUTHORITY, AFTER CONDUCTING A
14	RISK-BASED ASSESSMENT, AS DEFINED BY THE BOARD BY RULE, TO INSPECT
15	AN OUT-OF-STATE PHARMACY, A NONRESIDENT 503B OUTSOURCING
16	FACILITY, OR AN OUT-OF-STATE WHOLESALER.
17	(j) Review and approve or reject applications for participation in
18	the pharmacy peer health assistance diversion program pursuant to part
19	2 of this article 280 and perform any other functions that were performed
20	by the rehabilitation evaluation committee prior to its repeal;
21	(k) SEND A QUARTERLY ELECTRONIC NEWSLETTER TO ALL
22	LICENSEES BY E-MAIL THAT DETAILS CHANGES IN STATE LAW THAT
23	AFFECT OR ARE PERTINENT TO THE PRACTICE OF PHARMACY.
24	SECTION 7. In Colorado Revised Statutes, amend 12-280-111
25	as follows:
26	12-280-111. Malpractice claims information - not public -
27	exception. (1) Each insurance company licensed to do business in this

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pharmacists and pharmacies, and each pharmacist or pharmacy that self-insures, shall send to the board, in the form prescribed by the board, information relating to each malpractice claim against a licensed pharmacist that is settled or in which judgment is rendered against the insured.

- (2) The insurance company or self-insured pharmacist or pharmacy shall provide information relating to each malpractice claim as is deemed necessary by the board to conduct a further investigation and hearing.
- (3) Information relating to each malpractice claim provided by insurance companies or self-insured pharmacists or pharmacies PURSUANT TO SECTION 10-1-125.3 is exempt from the provisions of any law requiring that the proceedings of the board be conducted publicly or that the minutes or records of the board be open to public inspection unless the board takes final disciplinary action. The board may use the information in any formal hearing involving a licensee or registrant.

SECTION 8. In Colorado Revised Statutes, 12-280-118, **amend** (5)(a)(I) and (5)(a)(II) as follows:

12-280-118. Prescription drug outlet under charge of pharmacist - rules. (5) (a) Except as specified in subsection (5)(b) of this section, the pharmacist responsible for the prescription order or chart order may delegate the following tasks to the following individuals if, in the pharmacist's professional judgment, the delegation is appropriate:

(I) Specific tasks, excluding tasks described in section 12-280-103 (38.5)(a), but which tasks may include delivery and proper and safe storage of drugs or devices, to ancillary personnel, other than a

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1	pharmacist or pharmacy intern, who are under the pharmacist's
2	supervision, WHICH TASKS MAY INCLUDE:
3	
4	(A) CASHIER TRANSACTIONS;
5	(B) MEDICATION SHIPPING AND HANDLING;
6	(C) MEDICATION TRANSPORTATION;
7	(D) RECORD KEEPING;
8	(E) TELEPHONE OR COMMUNICATION TRIAGE; OR
9	(F) INVENTORY MANAGEMENT; or
10	
11	(II) Specific tasks described in section 12-280-103 (38.5)(a) or in
12	board rules adopted pursuant to section 12-280-103 (38.5)(a)(VI)
13	(38.5)(a)(VIII) to a pharmacy technician who is under the pharmacist's
14	supervision.
15	SECTION 9. In Colorado Revised Statutes, 12-280-119, amend
16	(7) and (11); and repeal (9) as follows:
17	12-280-119. Registration of facilities - rules. (7) A separate
18	registration is required under this section for any area outside the outlet
19	that is not a satellite where pharmaceutical PHARMACIST care and services
20	are provided and for any area outside the outlet that is under different
21	ownership from the outlet.
22	(9) (a) Subject to subsection (9)(b) of this section, a prescription
23	drug outlet may register as a compounding prescription drug outlet.
24	(b) The board shall not register a facility as a compounding
25	prescription drug outlet unless:
26	(I) The facility has been accredited by a board-approved
27	compounding accreditation entity to be within acceptable parameters to

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1	compound more than ten percent of the facility's total sales; and
2	(II) Ownership of the facility is vested solely in a pharmacist.
3	(c) To be approved by the board to accredit a compounding
4	prescription drug outlet, a compounding accreditation entity shall be, at
5	a minimum, a scientific organization with expertise in compounding
6	medications.
7	(11) A prescription drug outlet may register as a specialized
8	prescription drug outlet if it engages in the compounding, dispensing, and
9	delivery of drugs and devices to, or the provision of pharmaceutical
10	PHARMACIST care SERVICES to residents of, a long-term care facility. The
11	board shall adopt rules as necessary to implement this subsection (11).
12	SECTION 10. In Colorado Revised Statutes, 12-280-120, amend
13	(6)(b), (10), and (15)(b) introductory portion; and repeal (15)(a) as
14	follows:
1415	follows: 12-280-120. Compounding - dispensing - sale of drugs and
15	12-280-120. Compounding - dispensing - sale of drugs and
15 16	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules
15 16 17	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY
15 16 17 18	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY compound AND DISTRIBUTE drugs for office use by a practitioner or for
15 16 17 18 19	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY compound AND DISTRIBUTE drugs for office use by a practitioner or for use by a hospital located in this state. The rules must limit the amount of
15 16 17 18 19 20	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY compound AND DISTRIBUTE drugs for office use by a practitioner or for use by a hospital located in this state. The rules must limit the amount of drugs a prescription drug outlet may compound and distribute to a
15 16 17 18 19 20 21	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY compound AND DISTRIBUTE drugs for office use by a practitioner or for use by a hospital located in this state. The rules must limit the amount of drugs a prescription drug outlet may compound and distribute to a practitioner or hospital FOR VETERINARY USE pursuant to this subsection
15 16 17 18 19 20 21 22	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY compound AND DISTRIBUTE drugs for office use by a practitioner or for use by a hospital located in this state. The rules must limit the amount of drugs a prescription drug outlet may compound and distribute to a practitioner or hospital FOR VETERINARY USE pursuant to this subsection (6)(b) to no more than SECTION 12-280-121, BUT THE AMOUNT OF DRUGS
15 16 17 18 19 20 21 22 23	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY compound AND DISTRIBUTE drugs for office use by a practitioner or for use by a hospital located in this state. The rules must limit the amount of drugs a prescription drug outlet may compound and distribute to a practitioner or hospital FOR VETERINARY USE pursuant to this subsection (6)(b) to no more than SECTION 12-280-121, BUT THE AMOUNT OF DRUGS THE PRESCRIPTION DRUG OUTLET MAY COMPOUND AND DISTRIBUTE FOR
15 16 17 18 19 20 21 22 23 24	12-280-120. Compounding - dispensing - sale of drugs and devices - rules - definition. (6) (b) (I) The board shall promulgate rules authorizing A prescription drug outlet located in this state to MAY compound AND DISTRIBUTE drugs for office use by a practitioner or for use by a hospital located in this state. The rules must limit the amount of drugs a prescription drug outlet may compound and distribute to a practitioner or hospital FOR VETERINARY USE pursuant to this subsection (6)(b) to no more than SECTION 12-280-121, BUT THE AMOUNT OF DRUGS THE PRESCRIPTION DRUG OUTLET MAY COMPOUND AND DISTRIBUTE FOR VETERINARY USE MUST NOT EXCEED ten percent of the total number of

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of this section applies to a compounded drug for veterinary use that a prescription drug outlet distributes in Colorado.

- (B) For purposes of this subsection (6)(b)(II) AS USED IN THIS SUBSECTION (6)(b), a "prescription drug outlet" includes a nonresident pharmacy outlet registered or licensed pursuant to this article 280 where prescriptions are compounded and dispensed, but only if the nonresident pharmacy outlet has provided the board with a copy of the most recent inspection of the nonresident pharmacy outlet by the agency that regulates pharmaceuticals in the state of residence and a copy of the most recent inspection received from a board-approved third-party entity that inspects pharmacy outlets, for which third-party inspection the nonresident pharmacy outlet shall obtain and pay for on an annual basis, and the board approves the inspection reports as satisfactorily demonstrating proof of compliance with the board's own inspection procedure and standards.
- (10) (a) Any hospital employee or agent authorized by law to administer or dispense medications may dispense a twenty-four-hour SEVENTY-TWO-HOUR supply of drugs on the specific order of a practitioner to a registered emergency room patient.
- (b) A HOSPITAL MAY DISPENSE A PRESCRIPTION DRUG PURSUANT TO A CHART ORDER FOR A HOSPITALIZED PATIENT FOR USE BY THE PATIENT DURING A TEMPORARY LEAVE FROM THE HOSPITAL OF LESS THAN SEVENTY-TWO HOURS IF THE PRESCRIPTION DRUG:
- 23 (I) IS LABELED IN ACCORDANCE WITH SECTION 12-280-124(1) AND 24 (2);
- 25 (II) IS ADMINISTERED BY AN AUTHORIZED PERSON;
- 26 (III) IS DISPENSED PURSUANT TO A CURRENT, ACTIVE ORDER; AND
- 27 (IV) IS LIMITED TO A <u>SEVENTY-TWO-HOUR</u> SUPPLY OR, IF THE

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1	TEMPORARY LEAVE IS FOR LESS THAN TWENTY-FOUR HOURS, THE
2	QUANTITY THE PATIENT REQUIRES DURING THE TEMPORARY LEAVE.
3	(15) (a) A compounding prescription drug outlet registered
4	pursuant to section 12-280-119 (9) may dispense and distribute
5	compounded drugs without limitation to practitioners or to prescription
6	drug outlets under common ownership with the pharmacist who owns the
7	compounding prescription drug outlet.
8	(b) The following may distribute compounded and prepackaged
9	medications, without limitation, to pharmacies and other outlets under
10	common ownership of the entity:
11	SECTION 11. In Colorado Revised Statutes, 12-280-121, amend
12	(3), (4), and (6) as follows:
13	12-280-121. Compounding drugs for office use by a
14	veterinarian - rules - definitions. (3) A licensed veterinarian shall not
15	administer or dispense a compounded drug maintained for office stock
16	pursuant to this section or for office use pursuant to section 12-280-120
17	(6)(b)(II) SECTION 12-280-120 (6)(b) without a valid
18	veterinarian-client-patient relationship in place at the time of
19	administering the compounded drug to an animal patient or dispensing the
20	compounded drug to a client.
21	(4) To compound and distribute a controlled substance pursuant
22	to this section or section 12-280-120 (6)(b)(II) SECTION 12-280-120
23	(6)(b), a registered prescription drug outlet shall possess a valid
24	manufacturing registration from the federal drug enforcement
25	administration.
26	(6) The board may promulgate rules as necessary concerning
27	compounded veterinary pharmaceuticals pursuant to this section and

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1	section 12-280-120 (6)(b)(II) SECTION 12-280-120 (6)(b).
2	SECTION 12. In Colorado Revised Statutes, 12-280-123, amend
3	(3) as follows:
4	12-280-123. Prescription required - exception - prescribing
5	and dispensing opiate antagonists - selling nonprescription syringes
6	and needles. (3) A pharmacist may PRESCRIBE AND dispense an opiate
7	antagonist in accordance with section 12-30-110.
8	SECTION 13. In Colorado Revised Statutes, 12-280-124, amend
9	(1)(b) as follows:
10	12-280-124. Labeling - rules. (1) A prescription drug dispensed
11	pursuant to an order must be labeled as follows:
12	(b) (I) If the prescription is for an anabolic steroid, the purpose for
13	which the anabolic steroid is being prescribed must appear on the label.
14	(II) If the prescription is for any drug other than an anabolic
15	steroid The symptom or purpose for which the drug is being prescribed
16	must appear on the label, if, after being advised by the practitioner, the
17	patient or the patient's authorized representative so requests. If the
18	practitioner does not provide the symptom or purpose for which a drug is
19	being prescribed, the pharmacist may fill the prescription order without
20	contacting the practitioner, patient, or patient's representative. unless the
21	prescription is for an anabolic steroid.
22	SECTION 14. In Colorado Revised Statutes, 12-280-125, amend
23	(2)(a) introductory portion, (3)(b), and (5); and add (1)(a.5) as follows:
24	12-280-125. Substitution of prescribed drugs and biological
25	products authorized - when - conditions. (1) (a.5) (I) A PHARMACIST
26	FILLING A PRESCRIPTION ORDER FOR A SPECIFIC DRUG MAY SUBSTITUTE A
27	DRUG IN THE SAME THERAPEUTIC CLASS AS LONG AS THE PATIENT AGREES

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1	TO THE SUBSTITUTION AND THE SUBSTITUTION IS MADE TO REPLACE A
2	DRUG THAT IS ON BACK ORDER, TO ENSURE FORMULARY COMPLIANCE
3	WITH THE PATIENT'S HEALTH INSURANCE PLAN, OR, IN THE CASE OF AN
4	UNINSURED PATIENT, TO LOWER THE COST TO THE PATIENT FOR THE DRUG
5	WHILE MAINTAINING SAFETY.
6	(II) This subsection $(1)(a.5)$ does not authorize:
7	(A) THE SUBSTITUTION OF BIOLOGICAL PRODUCTS, NARROW
8	THERAPEUTIC INDEX DRUGS, OR PSYCHOTROPIC DRUGS; OR
9	(B) A SUBSTITUTION WHEN THE PRACTITIONER HAS INDICATED, IN
10	THE MANNER DESCRIBED IN SUBSECTION (2) OF THIS SECTION, THAT THE
11	PHARMACIST SHALL NOT SUBSTITUTE A DRUG IN THE SAME THERAPEUTIC
12	CLASS AS THE DRUG PRESCRIBED.
13	
14	(2) (a) If, in the opinion of the practitioner, it is in the best interest
15	of the patient that the pharmacist not substitute an equivalent drug, A
16	DRUG IN THE SAME THERAPEUTIC CLASS, or AN interchangeable
17	biological product for the specific drug or biological product he or she
18	THE PRACTITIONER prescribed, the practitioner may convey this
19	information to the pharmacist in any of the following manners:
20	(3) (b) The pharmacist is not required to communicate a
21	substitution to institutionalized patients IN AN INPATIENT SETTING OR AN
22	OUTPATIENT INFUSION <u>CENTER.</u>
23	
24	(5) If a prescription drug outlet does not have in stock the
25	prescribed drug or biological product and the only equivalent drug, DRUG
26	IN THE SAME THERAPEUTIC CLASS, or interchangeable biological
27	product in stock is higher priced, the pharmacist, with the consent of the

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1	purchaser, may substitute the higher priced drug or interchangeable
2	biological product. This subsection (5) applies only to a prescription drug
3	outlet located in a town, as defined in section 31-1-101 (13).
4	
5	SECTION 15. In Colorado Revised Statutes, add 12-280-125.3
6	as follows:
7	12-280-125.3. Pharmacists' authority - minor prescription
8	adaptions. (1) EXCEPT AS PROVIDED IN SUBSECTION (3) OF THIS SECTION,
9	A PHARMACIST WHO IS ACTING IN GOOD FAITH AND IS USING PROFESSIONAL
10	JUDGMENT AND EXERCISING REASONABLE CARE MAY MAKE THE
11	FOLLOWING MINOR ADAPTIONS TO AN ORDER IF THE PHARMACIST HAS THE
12	INFORMED CONSENT OF THE PATIENT FOR WHOM THE PRESCRIPTION WAS
13	PROVIDED:
14	(a) A CHANGE IN THE PRESCRIBED DOSAGE FORM OR DIRECTIONS
15	FOR USE OF THE PRESCRIPTION DRUG IF THE CHANGE ACHIEVES THE INTENT
16	OF THE PRESCRIBING PRACTITIONER;
17	(b) A CHANGE IN THE PRESCRIBED QUANTITY OF THE PRESCRIPTION
18	DRUG IF THE PRESCRIBED QUANTITY IS NOT A PACKAGE SIZE
19	COMMERCIALLY AVAILABLE FROM THE MANUFACTURER;
20	(c) AN EXTENSION OF THE QUANTITY OF A MAINTENANCE DRUG
21	FOR THE LIMITED QUANTITY NECESSARY TO ACHIEVE MEDICATION REFILL
22	SYNCHRONIZATION FOR THE PATIENT; AND
23	(d) Completion of missing information on the order if
24	THERE IS SUFFICIENT EVIDENCE TO SUPPORT THE CHANGE.
25	(2) A PHARMACIST WHO ADAPTS AN ORDER IN ACCORDANCE WITH
26	SUBSECTION (1) OF THIS SECTION SHALL DOCUMENT THE ADAPTION AND
27	THE JUSTIFICATION FOR THE CHANGE IN THE PATIENT'S PHARMACY RECORD

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1	WITH THE ORIGINAL PRESCRIPTION AND SHALL NOTIFY THE PRESCRIBING
2	PRACTITIONER OF THE ADAPTION.
3	(3) A PHARMACIST SHALL NOT ADAPT AN ORDER IF THE
4	PRESCRIBING PRACTITIONER HAS WRITTEN "DO NOT ADAPT" ON THE
5	PRESCRIPTION OR HAS OTHERWISE COMMUNICATED TO THE PHARMACIST
6	THAT THE PRESCRIPTION MUST NOT BE ADAPTED.
7	SECTION 16. In Colorado Revised Statutes, 12-280-126, amend
8	(1)(e); and add (1)(t) as follows:
9	12-280-126. Unprofessional conduct - grounds for discipline.
10	(1) The board may take disciplinary or other action as authorized in
11	section 12-20-404, after a hearing held in accordance with the provisions
12	of sections 12-20-403 and 12-280-127, upon proof that the licensee,
13	certificant, or registrant:
14	(e) Has a substance use disorder, as defined in section 27-81-102,
15	or Engages in the habitual or excessive use or abuse of alcohol, a
16	habit-forming drug, or a controlled substance, as defined in section
17	18-18-102 (5);
18	(t) Has failed to notify the board, in writing and within
19	THIRTY DAYS AFTER A JUDGMENT OR SETTLEMENT IS ENTERED, OF A FINAL
20	JUDGMENT BY A COURT OF COMPETENT JURISDICTION AGAINST THE
21	LICENSEE OR REGISTRANT FOR MALPRACTICE IN THE PRACTICE OF
22	PHARMACY OR A SETTLEMENT BY THE LICENSEE IN RESPONSE TO CHARGES
23	OR ALLEGATIONS OF MALPRACTICE IN THE PRACTICE OF PHARMACY AND,
24	IN THE CASE OF A JUDGMENT, HAS FAILED TO INCLUDE IN THE NOTICE THE
25	NAME OF THE COURT, THE CASE NUMBER, AND THE NAMES OF ALL PARTIES
26	TO THE ACTION;
27	SECTION 17. In Colorado Revised Statutes, 12-280-127, amend

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1	(b) as follows:
2	12-280-127. Disciplinary actions. (6) The board may send a
3	letter of admonition by certified mail to a licensee, certificant, or
4	registrant under the circumstances specified in and in accordance with
5	section 12-20-404 (4). In the case of a complaint, the board may send a
6	copy of the letter of admonition to the person making the complaint.
7	SECTION 18. In Colorado Revised Statutes, add 12-280-133.5
8	and 12-280-133.7 as follows:
9	12-280-133.5. Nonresident 503B outsourcing facility
10	registration - requirements - denial, revocation, or suspension - rules
11	(1) A NONRESIDENT 503B OUTSOURCING FACILITY SHALL NOT CONDUCT
12	THE BUSINESS OF DISTRIBUTING COMPOUNDED PRESCRIPTION DRUGS IN
13	THIS STATE WITHOUT FIRST REGISTERING WITH THE BOARD AS A
14	NONRESIDENT 503B OUTSOURCING FACILITY. A NONRESIDENT 503E
15	OUTSOURCING FACILITY SHALL APPLY FOR A NONRESIDENT 503E
16	OUTSOURCING FACILITY REGISTRATION ON A FORM FURNISHED BY THE
17	BOARD AND SHALL SUBMIT THE FOLLOWING TO THE BOARD WITH THE
18	APPLICATION:
19	(a) PROOF THAT THE FACILITY IS ACTIVELY REGISTERED WITH THE
20	FDA AS A 503B OUTSOURCING FACILITY AND IS ACTIVELY LICENSED
21	PERMITTED, OR REGISTERED IN THE STATE IN WHICH IT IS A RESIDENT;
22	(b) THE LOCATION, NAMES, AND TITLES OF ALL PRINCIPAL ENTITY
23	OFFICERS AND THE NAME OF THE PHARMACIST IN CHARGE OF THE
24	OPERATIONS OF THE FACILITY;
25	(c) VERIFICATION THAT THE FACILITY COMPLIES WITH ALL LAWFUL
26	DIRECTIONS AND REQUESTS FOR INFORMATION FROM THE \overline{FDA} AND FROM
2.7	THE REGULATORY OR LICENSING AGENCY OF THE STATE IN WHICH IT IS

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1	LICENSED, PERMITTED, OR REGISTERED, AS WELL AS WITH ALL REQUESTS
2	FOR INFORMATION MADE BY THE BOARD PURSUANT TO THIS SECTION;
3	(d) A COPY OF THE MOST RECENT INSPECTION REPORT RESULTING
4	FROM AN INSPECTION CONDUCTED BY THE FDA; AND
5	(e) ANY OTHER INFORMATION THE BOARD DEEMS NECESSARY TO
6	CARRY OUT THE PURPOSE OF THIS SECTION.
7	(2) A nonresident 503B outsourcing facility shall:
8	(a) MAINTAIN AT ALL TIMES A VALID, UNEXPIRED LICENSE, PERMIT,
9	OR REGISTRATION TO OPERATE THE 503B OUTSOURCING FACILITY IN
10	COMPLIANCE WITH THE LAWS OF THE STATE IN WHICH IT IS A RESIDENT;
11	AND
12	(b) Comply with the requirements of the "Federal Food,
13	Drug, and Cosmetic Act", 21 U.S.C. sec. 301 et seq., as amended, or
14	THE DQSA OR WITH FDA REGULATIONS IMPLEMENTING EITHER ACT.
15	(3) THE BOARD MAY DENY, REVOKE, OR SUSPEND A NONRESIDENT
16	503B OUTSOURCING FACILITY REGISTRATION IF:
17	(a) THE FACILITY FAILS TO COMPLY WITH THIS SECTION OR WITH
18	ANY RULE PROMULGATED BY THE BOARD;
19	(b) The FDA has revoked or refused to renew the
20	NONRESIDENT 503B OUTSOURCING FACILITY'S FDA REGISTRATION FOR
21	FAILING TO COMPLY WITH THE REQUIREMENTS OF THE "FEDERAL FOOD,
22	Drug, and Cosmetic Act", 21 U.S.C. sec. 301 et seq., as amended,
23	THE DQSA, OR FDA REGULATIONS IMPLEMENTING EITHER ACT OR THE
24	FACILITY'S FDA REGISTRATION HAS EXPIRED OR IS NO LONGER ACTIVE; OR
25	(c) The state in which the nonresident $503B$ outsourcing
26	FACILITY RESIDES HAS REVOKED OR REFUSED TO RENEW THE FACILITY'S
27	LICENSE PERMIT OR REGISTRATION FOR FAILING TO COMPLY WITH THE

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1	LAWS OF THAT STATE OR THE FACILITY'S LICENSE, PERMIT, OR
2	REGISTRATION IN ANOTHER STATE HAS EXPIRED OR IS NO LONGER ACTIVE.
3	(4) THE BOARD MAY ADOPT RULES AS NECESSARY TO IMPLEMENT
4	THIS SECTION.
5	12-280-133.7. Third-party logistics providers - registration -
6	denial, revocation, or suspension - rules. (1) A THIRD-PARTY LOGISTICS
7	PROVIDER SHALL NOT CONDUCT BUSINESS IN THIS STATE WITHOUT FIRST
8	REGISTERING WITH THE BOARD AS A THIRD-PARTY LOGISTICS PROVIDER.
9	A THIRD-PARTY LOGISTICS PROVIDER SHALL APPLY FOR A REGISTRATION
10	ON A FORM FURNISHED BY THE BOARD AND SHALL SUBMIT THE
11	INFORMATION REQUIRED PURSUANT TO RULES ADOPTED BY THE BOARD.
12	THE BOARD SHALL SPECIFY, BY RULE, THE INFORMATION A THIRD-PARTY
13	LOGISTICS PROVIDER MUST SUBMIT WITH ITS APPLICATION FOR A
14	REGISTRATION.
15	(2) A THIRD-PARTY LOGISTICS PROVIDER SHALL COMPLY WITH ALL
16	LAWFUL DIRECTIONS AND REQUESTS FOR INFORMATION FROM THE FDA,
17	THE REGULATORY OR LICENSING AGENCY OF THE STATE IN WHICH IT IS
18	LICENSED, PERMITTED, OR REGISTERED, AND THE BOARD.
19	(3) THE BOARD MAY DENY, REVOKE, OR SUSPEND A THIRD-PARTY
20	LOGISTICS PROVIDER REGISTRATION IF:
21	(a) THE THIRD-PARTY LOGISTICS PROVIDER FAILS TO COMPLY WITH
22	THIS SECTION OR WITH ANY RULE PROMULGATED BY THE BOARD;
23	(b) The FDA has revoked or refused to renew the
24	THIRD-PARTY LOGISTICS PROVIDER'S FDA REGISTRATION FOR FAILING TO
25	COMPLY WITH THE REQUIREMENTS OF THE "FEDERAL FOOD, DRUG, AND
26	COSMETIC ACT", 21 U.S.C. SEC. 301 ET SEQ., AS AMENDED, OR THE DQSA
27	OR WITH FDA REGULATIONS IMPLEMENTING EITHER ACT; OR

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1	(c) THE STATE IN WHICH THE THIRD-PARTY LOGISTICS PROVIDER
2	RESIDES HAS REVOKED OR REFUSED TO RENEW THE PROVIDER'S LICENSE,
3	PERMIT, OR REGISTRATION FOR FAILING TO COMPLY WITH THE LAWS OF
4	THAT STATE.
5	(4) THE BOARD MAY ADOPT RULES AS NECESSARY TO IMPLEMENT
6	THIS SECTION.
7	SECTION 19. In Colorado Revised Statutes, 12-280-134, add
8	(10) as follows:
9	12-280-134. <u>Records.</u> (10) The board shall <u>allow</u>
10	ELECTRONIC STORAGE OF RECORDS REQUIRED TO BE MAINTAINED
11	PURSUANT TO THIS SECTION.
12	SECTION 20. In Colorado Revised Statutes, add 12-280-137 and
13	12-280-138 as follows:
14	12-280-137. Investigations of suspicious drugs. ALL
15	PRESCRIPTION DRUG OUTLETS, MANUFACTURERS, REPACKAGERS, AND
16	WHOLESALERS SHALL INVESTIGATE ANY SUSPECT PRODUCT, AS DEFINED
17	IN THE DQSA AND ANY FEDERAL REGULATIONS IMPLEMENTING THE
18	DQSA, AND SHALL USE DOCUMENTATION AND REPORTING PROCEDURES
19	RELATING TO THE INVESTIGATION IN ACCORDANCE WITH THE DQSA AND
20	ANY FEDERAL REGULATIONS IMPLEMENTING THE DQSA.
21	12-280-138. Patient counseling - pharmacists required to
22	perform - patient may decline - rules. (1) (a) EXCEPT IN THE
23	CIRCUMSTANCES DESCRIBED IN SUBSECTION (2) OF THIS SECTION, A
24	PHARMACIST SHALL PROVIDE PATIENT COUNSELING ON NEW MEDICATION
25	THERAPY AND, BASED ON THE PHARMACIST'S PROFESSIONAL JUDGMENT
26	AND DUE DILIGENCE, MAY PROVIDE PATIENT COUNSELING FOR ANY OTHER
27	PRESCRIPTION. IF THE PHARMACIST IS UNABLE TO PROVIDE PATIENT

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1	COUNSELING ORALLY DUE TO LANGUAGE BARRIERS, THE PHARMACIST MAY
2	USE ALTERNATE MEANS TO PROVIDE THE PATIENT COUNSELING.
3	(b) (I) EXCEPT AS PROVIDED IN SUBSECTION (1)(b)(II) OF THIS
4	SECTION, ALL IN-STATE PHARMACIES MUST ENSURE THAT THEIR
5	PHARMACISTS PROVIDE PATIENT COUNSELING IN ACCORDANCE WITH THIS
6	SECTION.
7	(II) This subsection (1)(b) does not apply to an other
8	<u>OUTLET.</u>
9	(2) A PATIENT MAY DECLINE PATIENT COUNSELING OFFERED BY A
10	PHARMACIST. A PHARMACIST SHALL DOCUMENT, IN THE FORM AND
11	MANNER SPECIFIED IN BOARD RULES, WHEN A PATIENT DECLINES PATIENT
12	COUNSELING.
13	(3) THE BOARD SHALL ADOPT RULES SPECIFYING:
14	(a) THE ALTERNATE MEANS BY WHICH PHARMACISTS MAY PROVIDE
15	PATIENT COUNSELING WHEN LANGUAGE BARRIERS PRECLUDE PROVIDING
16	PATIENT COUNSELING ORALLY; AND
17	(b) THE FORM AND MANNER FOR PHARMACISTS TO DOCUMENT
18	WHEN A PATIENT DECLINES COUNSELING, WHICH RULES MUST SPECIFY A
19	DOCUMENTATION PROCESS THAT IS SIMPLE AND ALLOWS THE
20	DOCUMENTATION TO BE COMPLETED ELECTRONICALLY.
21	(4) This section does not apply to pharmacists who
22	DISPENSE PRESCRIPTION DRUGS TO PERSONS IN THE CUSTODY OF THE
23	DEPARTMENT OF CORRECTIONS.
24	SECTION 21. In Colorado Revised Statutes, amend 12-280-201
25	as follows:
26	12-280-201. Legislative declaration. (1) The general assembly
27	finds, determines, and declares that the creation of a pharmacy peer health

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assistance diversion program for those persons subject to the jurisdiction of the board will serve to safeguard the life, health, property, and public welfare of the people of this state. A pharmacy peer health assistance diversion program will help practitioners experiencing impaired practice due to psychiatric, psychological, or emotional problems; excessive alcohol or drug use; or alcohol or substance use disorders. The general assembly further declares that a pharmacy peer health assistance diversion program will protect the privacy and welfare of those persons who provide services and at the same time assist the board in carrying out its duties and responsibilities to ensure that only qualified persons are allowed to engage in providing those services that are under the jurisdiction of the board.

(2) It is the intent of the general assembly that the pharmacy peer health assistance diversion program and its related procedures be utilized by the board in conjunction with, or as an alternative to, the use of disciplinary proceedings by the board, which proceedings are by their nature time-consuming and costly to the people of this state. The pharmacy peer health assistance diversion program is hereby established to alleviate the need for disciplinary proceedings, while at the same time providing safeguards that protect the public health, safety, and welfare. The general assembly further declares that it intends that the board will act to implement the provisions of this article 280.

SECTION 22. In Colorado Revised Statutes, 12-280-203, **amend** (2)(b) introductory portion as follows:

12-280-203. Pharmacy peer health assistance fund - rules.

(2) (b) The board shall select one or more peer health assistance organizations as designated providers. To be eligible for designation by

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1	the board, a peer health assistance diversion program shall:
2	SECTION 23. In Colorado Revised Statutes, 12-280-204, amend
3	(1), (2)(b), and (3) as follows:
4	12-280-204. Eligibility - participants. (1) Any licensee may
5	apply to the board for participation in a qualified peer health assistance
6	diversion program.
7	(2) In order to be eligible for participation, a licensee shall:
8	(b) After a full explanation of the operation and requirements of
9	the peer health assistance diversion program, agree to voluntarily
10	participate in the program and agree in writing to participate in the
11	program of the peer health assistance organization designated by the
12	board.
13	(3) Notwithstanding the provisions of this section, the board may
14	summarily suspend the license of any licensee who is referred to a peer
15	health assistance diversion program by the board and who fails to attend
16	or to complete the program. If the board summarily suspends the license
17	the board shall schedule a hearing on the suspension, which shall be
18	conducted in accordance with section 24-4-105.
19	SECTION 24. In Colorado Revised Statutes, amend 12-280-205
20	as follows:
21	12-280-205. Liability. Nothing in this part 2 creates any liability
22	of the board, members of the board, or the state of Colorado for the
23	actions of the board in making awards to pharmacy peer health assistance
24	organizations or in designating licensees to participate in the programs of
25	pharmacy peer health assistance organizations. No civil action may be
26	brought or maintained against the board, its members, or the state for an
27	injury alleged to have been the result of an act or omission of a licensee

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- participating in or referred to a state-funded program provided by a pharmacy peer health assistance organization. However, the state remains liable under the "Colorado Governmental Immunity Act", article 10 of title 24, if an injury alleged to have been the result of an act or omission of a licensee participating in or referred to a state-funded peer health assistance diversion program occurred while the licensee was performing duties as an employee of the state.

 SECTION 25. In Colorado Revised Statutes, 12-280-301, amend.
- **SECTION 25.** In Colorado Revised Statutes, 12-280-301, **amend** 9 (3) and (7); **repeal** (1), (4), (6), and (8); and **add** (7.5) as follows:

- **12-280-301. Definitions.** As used in this part 3, unless the context otherwise requires:
- (1) "Authentication" means the process of affirmatively verifying that each transaction listed on a pedigree has occurred before any wholesale distribution of a prescription drug occurs.
- (3) "Designated representative" means a person authorized by a licensed REGISTERED wholesaler to act as a representative for the wholesaler.
- (4) "Drop shipment" means the sale by a manufacturer of the manufacturer's prescription drug, that manufacturer's third-party logistics provider, or that manufacturer's exclusive distributor to a wholesaler whereby the wholesaler takes title to, but not possession of, the prescription drug and the wholesaler invoices the board-registered outlet or practitioner authorized by law to prescribe the prescription drug and the board-registered outlet or the practitioner authorized by law to prescribe the prescription drug directly from the manufacturer of the drug, that manufacturer's third-party logistics provider, or that manufacturer's exclusive distributor.

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1	(6) "Normal distribution channel" means a chain of custody for a
2	prescription drug that goes directly or by drop shipment from a
3	manufacturer of the prescription drug to:
4	(a) (I) A wholesaler to a pharmacy to a patient or other designated
5	persons authorized by law to dispense or administer a prescription drug
6	to a patient;
7	(II) A wholesaler to a chain pharmacy warehouse to their
8	intracompany pharmacies to a patient;
9	(III) A chain pharmacy warehouse to its intracompany pharmacies
10	to a patient; or
11	(IV) A pharmacy to a patient; or
12	(b) A manufacturer's colicensed partner, third-party logistics
13	provider, or exclusive distributor to a wholesaler to a pharmacy to a
14	patient or other designated persons authorized by law to dispense or
15	administer the prescription drug to a patient; or
16	(c) A manufacturer's colicensed partner, or that manufacturer's
17	third-party logistics provider, or exclusive distributor to a wholesaler to
18	a chain pharmacy warehouse to that chain pharmacy warehouse's
19	intracompany pharmacy to a patient or other designated persons
20	authorized by law to dispense or administer the prescription drug to a
21	patient; or
22	(d) A wholesaler to a pharmacy buying cooperative warehouse to
23	a pharmacy that is a member or member owner of the cooperative to a
24	patient or other designated person authorized by law to dispense or
25	administer the prescription drug to a patient.
26	(7) "Pedigree" means a document or electronic file containing
27	information that records each distribution of any given prescription drug

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1	that leaves the normal distribution channel IN ACCORDANCE WITH THE
2	DQSA AND ANY FEDERAL REGULATIONS IMPLEMENTING THE DQSA.
3	(7.5) "PRESCRIPTION DRUG" HAS THE SAME MEANING AS SET FORTH
4	IN SECTION 12-280-103 (42); EXCEPT THAT "PRESCRIPTION DRUG"
5	EXCLUDES ANY DRUG SPECIFICALLY EXEMPTED UNDER THE DQSA AND
6	ANY FEDERAL REGULATIONS IMPLEMENTING THE DQSA.
7	(8) "Third-party logistics provider" means anyone who contracts
8	with a manufacturer to provide or coordinate warehousing, distribution,
9	or other services on behalf of a manufacturer but does not take title to a
10	prescription drug or have general responsibility to direct the prescription
11	drug's sale or disposition.
12	SECTION 26. In Colorado Revised Statutes, repeal 12-280-302.
13	SECTION 27. In Colorado Revised Statutes, 12-280-303, amend
14	(1), (2)(b), (2)(c), (3)(a) introductory portion, (3)(a)(VI), (3)(b), (4), (5)
15	introductory portion, (5)(f), and (6) as follows:
16	12-280-303. Wholesaler registration requirements - rules.
17	(1) (a) A wholesaler that resides in this state must be licensed by
18	REGISTER WITH the board BEFORE ENGAGING IN THE WHOLESALE
19	DISTRIBUTION OF PRESCRIPTION DRUGS IN THIS STATE. A wholesaler that
20	does not reside in this state must be licensed REGISTERED in this state
21	prior to engaging in the wholesale distribution of prescription drugs in
22	this state. The board shall exempt a manufacturer and that manufacturer's
23	third-party logistics providers to the extent involving that manufacturer's
24	drugs under contract from any licensing qualifications and other
25	requirements, including the requirements in subsections (3)(a)(VI) and
26	(3)(a)(VII) of this section, subsections (4) to (6) of this section, and
27	section 12-280-304, to the extent the requirements are not required by

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federal law or regulation, unless the particular requirements are deemed necessary and appropriate following rule-making by the board.

- (b) A manufacturer's exclusive distributor and pharmacy buying cooperative warehouse must be licensed by the board as a wholesaler pursuant to this part 3. A third-party logistics provider must be licensed by the board as a wholesale distributor pursuant to this part 3.
- (2) (b) An applicant for a license REGISTRATION shall pay any fee required by the accreditation body or the board and comply with any rules promulgated by the board.
- (c) The board shall not issue or renew a license REGISTRATION to a wholesaler who does not comply with this part 3.
- (3) (a) An applicant for a wholesaler license REGISTRATION shall provide to the board the following information, and any other information deemed appropriate by the board, on a form provided by the board:
- (VI) A list of the licenses, and REGISTRATIONS, OR permits issued to the applicant by any other state that authorizes the applicant to purchase or possess prescription drugs; and
- (b) A licensee REGISTRANT shall complete and return a form approved by the board at each renewal period. The board may suspend or revoke the license REGISTRATION of a wholesaler if the board determines that the wholesaler no longer qualifies for a license REGISTRATION.
- (4) Prior to issuing a wholesaler license REGISTRATION to an applicant, the board, the regulatory oversight body from another state, or a board-approved accreditation body may conduct a physical inspection of the facility at the business address provided by the applicant. Nothing in this subsection (4) shall preclude PRECLUDES the board from inspecting a wholesaler.

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(5) The designated representative of an applicant for a wholesaler license REGISTRATION shall:

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- (f) Serve in the capacity of a designated representative for only one applicant or wholesaler at a time, except where more than one licensed REGISTERED wholesaler is co-located in the same facility and the wholesalers are members of an affiliated group as defined by section 1504 of the federal "Internal Revenue Code of 1986", as amended;
- (6) A wholesaler shall obtain a license REGISTRATION for each facility it uses for the distribution of prescription drugs.

SECTION 28. In Colorado Revised Statutes, 12-280-305, **repeal** (1) and (4) as follows:

12-280-305. Restrictions on transactions. (1) A wholesaler shall accept prescription drug returns or exchanges from a pharmacy or a chain pharmacy warehouse pursuant to the terms and conditions of the agreement between the wholesale distributor and the pharmacy or chain pharmacy warehouse. The receiving wholesale distributor shall distribute returns or exchanges of expired, damaged, recalled, or otherwise unsaleable pharmaceutical product only to the original manufacturer or to a third-party returns processor. The returns or exchanges of prescription drugs, saleable or unsaleable, including any redistribution by a receiving wholesaler, are not subject to the pedigree requirements of section 12-280-306 so long as the drugs are exempt from the pedigree requirement of the federal food and drug administration's currently applicable "Prescription Drug Marketing Act of 1987" guidance. The pharmacies, chain pharmacy warehouses, and pharmacy buying cooperative warehouses are responsible for ensuring that the prescription drugs returned are what they purport to be and shall ensure that those

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1	returned prescription drugs were stored under proper conditions since
2	their receipt. Wholesalers are responsible for policing their returns
3	process and helping to ensure that their operations are secure and do not
4	permit the entry of adulterated or counterfeit product. A pharmacist shall
5	not knowingly return a medication that is not what it purports to be.
6	(4) A manufacturer or wholesaler shall not accept payment for, or
7	allow the use of, a person's or entity's credit to establish an account for the
8	purchase of prescription drugs from any person other than the owner of
9	record, the chief executive officer, or the chief financial officer listed on
10	the license of a person or entity legally authorized to receive prescription
11	drugs. An account established for the purchase of prescription drugs must
12	bear the name of the licensee. This subsection (4) does not apply to
13	standard ordering and purchasing business practices between a chain
14	pharmacy warehouse, a wholesaler, and a manufacturer.
15	SECTION 29. In Colorado Revised Statutes, repeal and reenact,
16	with amendments, 12-280-306 as follows:
17	12-280-306. Records - pedigree - compliance with DQSA. A
18	WHOLESALER SHALL ESTABLISH AND MAINTAIN INVENTORIES AND
19	RECORDS OF ALL TRANSACTIONS REGARDING THE RECEIPT AND
20	DISTRIBUTION OR OTHER DISPOSITION OF PRESCRIPTION DRUGS. THE
21	RECORDS MUST INCLUDE THE PEDIGREE FOR EACH WHOLESALE
22	DISTRIBUTION OF A PRESCRIPTION DRUG AS REQUIRED PURSUANT TO THE
23	DQSA and any federal regulations implementing the DQSA.
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25	SECTION 30. In Colorado Revised Statutes, 12-280-403, amend
26	(2)(b) introductory portion as follows:
27	12-280-403. Prescription drug use monitoring program -

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1	registration required. (2) (b) When registering with the program or at
2	any time thereafter, a practitioner or pharmacist may authorize up to three
3	designees to access the program under section 12-280-404 (3)(b) OR
4	(3)(d) or (3)(f), as applicable, on behalf of the practitioner, or AND A
5	pharmacist MAY AUTHORIZE UP TO SIX DESIGNEES TO ACCESS THE
6	PROGRAM UNDER SECTION 12-280-404 (3)(f), if:
7	SECTION 31. In Colorado Revised Statutes, 12-30-110, amend
8	(1)(a) introductory portion, (2)(a), (3) introductory portion, (4)(a), and
9	(7)(h) as follows:
10	12-30-110. Prescribing or dispensing opiate antagonists -
11	authorized recipients - definitions. (1) (a) A prescriber may prescribe
12	or dispense, directly or in accordance with standing orders and protocols,
13	and a pharmacist may dispense, pursuant to an order or standing orders
14	and protocols, an opiate antagonist to:
15	(2) (a) A prescriber who prescribes or dispenses or a pharmacist
16	who dispenses, an opiate antagonist pursuant to this section is strongly
17	encouraged to educate persons receiving the opiate antagonist on the use
18	of an opiate antagonist for overdose, including instruction concerning risk
19	factors for overdose, recognizing an overdose, calling emergency medical
20	services, rescue breathing, and administering an opiate antagonist.
21	(3) Neither A prescriber described in subsection (7)(h)(I)
22	SUBSECTION (7)(h) of this section nor a pharmacist engages DOES NOT
23	ENGAGE in unprofessional conduct OR IS NOT SUBJECT TO DISCIPLINE
24	pursuant to section 12-240-121, <i>12-255-120</i> , or 12-280-126, respectively,
25	and a prescriber described in subsection (7)(h)(II) of this section does not
26	engage in conduct that is grounds for discipline pursuant to section
27	12-255-120 AS APPLICABLE, if the prescriber issues standing orders and

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1	protocols regarding opiate antagonists or prescribes or dispenses, or the
2	pharmacist dispenses, pursuant to an order or standing orders and
3	protocols, an opiate antagonist in a good-faith effort to assist:
4	(4) (a) A prescriber or pharmacist who prescribes or dispenses an
5	opiate antagonist in accordance with this section is not subject to civil
6	liability or criminal prosecution, as specified in sections 13-21-108.7 (4)
7	and 18-1-712 (3), respectively.
8	(7) As used in this section:
9	(h) "Prescriber" means:
10	(I) A physician or physician assistant licensed pursuant to article
11	240 of this title 12; or
12	(II) An advanced practice registered nurse, as defined in section
13	12-255-104 (1), with prescriptive authority pursuant to section
14	12-255-112; or
15	(III) A PHARMACIST.
16	SECTION 32. In Colorado Revised Statutes, add with amended
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17	and relocated provisions 10-1-125.3 as follows:
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17	and relocated provisions 10-1-125.3 as follows:
17 18	and relocated provisions 10-1-125.3 as follows: 10-1-125.3. Reporting of malpractice claims against
17 18 19	and relocated provisions 10-1-125.3 as follows: 10-1-125.3. Reporting of malpractice claims against pharmacists and pharmacies. (1) [Formerly 12-280-111 (1)] Each
17 18 19 20	and relocated provisions 10-1-125.3 as follows: 10-1-125.3. Reporting of malpractice claims against pharmacists and pharmacies. (1) [Formerly 12-280-111 (1)] Each insurance company licensed to do business in this state and engaged in
17 18 19 20 21	and relocated provisions 10-1-125.3 as follows: 10-1-125.3. Reporting of malpractice claims against pharmacists and pharmacies. (1) [Formerly 12-280-111 (1)] Each insurance company licensed to do business in this state and engaged in the writing of malpractice insurance for licensed pharmacists and
17 18 19 20 21 22	and relocated provisions 10-1-125.3 as follows: 10-1-125.3. Reporting of malpractice claims against pharmacists and pharmacies. (1) [Formerly 12-280-111 (1)] Each insurance company licensed to do business in this state and engaged in the writing of malpractice insurance for licensed pharmacists and REGISTERED pharmacies, and each pharmacist or pharmacy that
17 18 19 20 21 22 23	and relocated provisions 10-1-125.3 as follows: 10-1-125.3. Reporting of malpractice claims against pharmacists and pharmacies. (1) [Formerly 12-280-111 (1)] Each insurance company licensed to do business in this state and engaged in the writing of malpractice insurance for licensed pharmacists and REGISTERED pharmacies, and each pharmacist or pharmacy that self-insures, shall send to the STATE board OF PHARMACY, in the form
17 18 19 20 21 22 23 24	and relocated provisions 10-1-125.3 as follows: 10-1-125.3. Reporting of malpractice claims against pharmacists and pharmacies. (1) [Formerly 12-280-111 (1)] Each insurance company licensed to do business in this state and engaged in the writing of malpractice insurance for licensed pharmacists and REGISTERED pharmacies, and each pharmacist or pharmacy that self-insures, shall send to the STATE board OF PHARMACY, in the form prescribed by the board COMMISSIONER IN COLLABORATION WITH THE

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1	(2) [Formerly 12-280-111 (2)] The insurance company or
2	self-insured pharmacist or pharmacy shall provide information relating to
3	each malpractice claim as is deemed THAT THE STATE BOARD OF
4	PHARMACY DEEMS necessary by the board to conduct a further
5	investigation and hearing.
6	SECTION <u>33.</u> In Colorado Revised Statutes, amend 13-64-303
7	as follows:
8	13-64-303. Judgments and settlements - reported - penalties.
9	Any final judgment, settlement, or arbitration award against any health
10	care professional or health care institution for medical malpractice shall
11	be reported within fourteen days by the professional's or institution's
12	medical malpractice insurance carrier in accordance with section
13	10-1-120, 10-1-120.5, 10-1-121, 10-1-124, 10-1-125, <i>10-1-125.3</i> , or
14	10-1-125.7, or by the professional or institution if there is no commercial
15	medical malpractice insurance coverage to the licensing agency of the
16	health care professional or health care institution for review,
17	investigation, and, where appropriate, disciplinary or other action. Any
18	health care professional, health care institution, or insurance carrier that
19	knowingly fails to report as required by this section shall be subject to a
20	civil penalty of not more than two thousand five hundred dollars. Such
21	penalty shall be determined and collected by the district court in the city
22	and county of Denver. All penalties collected pursuant to this section
23	shall be transmitted to the state treasurer, who shall credit the same to the
24	general fund.
25	SECTION 34. In Colorado Revised Statutes, 25-51-104, amend
26	(1)(c) and (1)(e) as follows:
2.7	25-51-104. Payment and financial resolution. (1) If a patient

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1	accepts an offer of compensation made pursuant to section 25-51-103 (5)
2	and receives the compensation, the payment of compensation to the
3	patient is not a payment resulting from:
4	(c) A malpractice claim settled or in which judgment is rendered
5	against a professional for purposes of reporting by malpractice insurance
6	companies under section 10-1-120, 10-1-120.5, 10-1-121, 10-1-124,
7	10-1-125, <i>10-1-125.3</i> , 10-1-125.5, or 10-1-125.7;
8	(e) A judgment, administrative action, settlement, or arbitration
9	award involving malpractice under section 12-200-106 (5), 12-210-105
10	(5), 12-215-115 (1)(i), 12-220-201 (1)(q) or (1)(r), 12-235-111 (1)(i),
11	12-240-125 (4)(b)(III), 12-245-226 (7), 12-250-116, 12-255-119
12	(3)(b)(II), 12-255-120 (1)(dd), 12-275-120 (1)(p) or (1)(v), 12-275-129,
13	12-280-111 (1) 12-280-126 (1)(t) , 12-285-120 (1)(o), 12-285-127 (1)(a),
14	12-285-211 (1)(k), 12-285-216 (1)(a), or 12-290-113 (2)(b)(III).
15	SECTION 35. In Colorado Revised Statutes, 25.5-2.5-204,
16	amend (3)(d) and (4)(a) as follows:
17	25.5-2.5-204. Eligible prescription drugs - eligible Canadian
18	suppliers - eligible importers - distribution requirements. (3) The
19	following entities are eligible importers and may obtain imported
20	prescription drugs:
21	(d) A licensed Colorado pharmacist or REGISTERED wholesaler
22	approved by the state department.
23	(4) (a) The state department shall designate an office or division
24	that must be a licensed pharmaceutical REGISTERED wholesaler or that
25	shall contract with a licensed pharmaceutical wholesaler licensed
26	REGISTERED pursuant to part 3 of article 280 of title 12.
27	SECTION 36. Effective date. This act takes effect September 1,

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- 1 2021; except that section 4 of this act takes effect upon passage.
- 2 **SECTION <u>37.</u>** Safety clause. The general assembly hereby finds,
- determines, and declares that this act is necessary for the immediate
- 4 preservation of the public peace, health, or safety.

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