A BILL FOR AN ACT

CONCERNING THE CONTINUATION OF THE STATE BOARD OF NURSING,
AND, IN CONNECTION THEREWITH, IMPLEMENTING THE
RECOMMENDATIONS CONTAINED IN THE 2019 SUNSET REPORT
BY THE DEPARTMENT OF REGULATORY AGENCIES.

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 - House Health and Insurance Committee. The bill implements the recommendations of the department of regulatory agencies in its sunset review and report on the "Nurse Practice Act" (act),
under which nurses are regulated by the state board of nursing (board). Specifically, the bill:

- Continues the act for 7 years, until September 1, 2027 (sections 1 and 2 of the bill);
- Authorizes the board to enter into a confidential agreement to limit practice with a nurse who has a health condition that affects the ability of the nurse to practice safely and modifies grounds for disciplining a nurse to specify that a nurse may be disciplined for failing to notify the board of a health condition that limits the nurse's ability to practice safely, failing to act within the limits imposed by the health condition, or failing to comply with the terms of a confidential agreement entered into with the board (sections 3 through 5);
- Adds, as a ground for disciplining a nurse, engaging in a sexual act with a patient during the course of care or within 6 months after care is concluded (section 4);
- Requires licensees and insurance carriers to report malpractice settlements and judgments (sections 4 and 6 through 8);
- Modifies the grounds for discipline relating to alcohol or drug use or abuse to clarify that the use or abuse need not be ongoing to trigger discipline (section 4);
- Requires a nurse to report an adverse action or the surrender of a license within 30 days after the action (section 4);
- Requires a nurse to report a criminal conviction within 30, rather than 45, days after the conviction (section 4);
- Repeals the standards of "willful" and "negligent" with regard to certain grounds for disciplining a nurse (section 4);
- Changes the title "advanced practice nurse" and the acronym "A.P.N." to "advanced practice registered nurse" and "A.P.R.N." (sections 9 through 17);
- Eliminates the requirement that an advanced practice nurse (APN) with prescriptive authority maintain and update an articulated plan once the APN has completed the provisional prescriptive authority period (section 13);
- Authorizes, rather than requires, the board to conduct random audits of an APN's articulated plan regarding the APN's provisional prescriptive authority (section 13);
- Eliminates the age limit for a nurse to obtain a volunteer license (sections 18 and 19);
- Repeals the requirement for the director of the division of professions and occupations to consult with the board

-2- HB20-1216
before appointing an executive administrator and other personnel for the board (section 20); 

! Repeals the requirement for at least one board member to sit on the panel to interview candidates for the board executive administrator position (section 20); and 

! Makes technical amendments to the act to: Split 2 distinct grounds for discipline that are included in a single paragraph in the disciplinary section of the act into 2 separate paragraphs; replaces references in the act to the term "refuse" with the term "deny"; and repeals an obsolete provision (sections 4 and 21 through 25).

1

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

SECTION 1. In Colorado Revised Statutes, amend 12-255-134 as follows:

12-255-134. Repeal of article - subject to review. This article 255 is repealed, effective July 1, 2020 SEPTEMBER 1, 2027. Before the repeal, the board is scheduled for review in accordance with section 24-34-104.

SECTION 2. In Colorado Revised Statutes, 24-34-104, repeal (18)(a)(V); and add (28)(a)(III) as follows:

24-34-104. General assembly review of regulatory agencies and functions for repeal, continuation, or reestablishment - legislative declaration - repeal. (18) (a) The following agencies, functions, or both, are scheduled to repeal on July 1, 2020:

(V) The state board of nursing created in article 255 of title 12;

(28) (a) The following agencies, functions, or both, are scheduled for repeal on September 1, 2027:

(III) THE STATE BOARD OF NURSING CREATED IN ARTICLE 255 OF TITLE 12;

SECTION 3. In Colorado Revised Statutes, 12-30-108, repeal
(4)(a)(I)(C) as follows:

12-30-108. Confidential agreement to limit practice - violation
grounds for discipline. (4) (a) This section does not apply to:

(I) The following health care professionals:

(C) Nurses regulated pursuant to article 255 of this title 12;

SECTION 4. In Colorado Revised Statutes, 12-255-120, amend
(1)(c), (1)(f), (1)(g), (1)(i), (1)(j), (1)(z), (1)(aa), and (1)(bb); and add
(1)(cc), (1)(dd), (1)(ee), (1)(ff), and (1)(gg) as follows:

12-255-120. Grounds for discipline. (1) "Grounds for discipline", as used in this article 255, means any action by any person who:

(c) Has willfully or negligently acted in a manner inconsistent with the health or safety of persons under his or her care;

(f) Has negligently or willfully practiced nursing in a manner that fails to meet generally accepted standards for the nursing practice;

(g) Has negligently or willfully violated any order or rule of the board pertaining to nursing practice or licensure;

(i) Excessively OR HABITUALLY uses or abuses OR HAS ENGAGED IN EXCESSIVE OR HABITUAL USE OR ABUSE OF alcohol, A habit-forming drugs DRUG, A controlled substances SUBSTANCE, as defined in section 18-18-102 (5), or ANY other drugs DRUG having similar effects; or is diverting controlled substances, as defined in section 18-18-102 (5), or other drugs having similar effects from the licensee's place of employment; except that the board has the discretion not to discipline the licensee if the licensee is participating in good faith in a program approved by the board designed to end the excessive OR HABITUAL use or abuse;
(j) Has failed to:

(I) Notify the board, as required by section 12-30-108 (1), of a physical illness, physical condition, or behavioral health, mental disability, health, or substance use disorder that renders the person unable affects the person’s ability to practice nursing with reasonable skill and safety to the patients and or that may endanger the health or safety of persons individuals under the person’s care;

(II) Act within the limitations created by a physical illness, physical condition, or behavioral health, mental health, or substance use disorder that renders the person unable to practice nursing with reasonable skill and safety to patients or that may endanger the health or safety of individuals under the person’s care; or

(III) Comply with the limitations agreed to under a confidential agreement entered into pursuant to section 12-30-108;

(z) Has failed to report to the board, within forty-five thirty days after a final conviction, that the person has been convicted of a crime, as defined in title 18;

(aa) Fails to maintain professional liability insurance in accordance with section 12-255-113; or

(bb) Has verified by signature the articulated plan developed by an advanced practice registered nurse pursuant to sections 12-240-108 and 12-255-112 (4) if the articulated plan fails to comply with the requirements of section 12-255-112 (4)(b)(II);

(cc) Engaged in a sexual act with a patient during the course of patient care or within six months immediately
FOLLOWING THE TERMINATION OF THE PERSON'S PROFESSIONAL
RELATIONSHIP WITH THE PATIENT. AS USED IN THIS SUBSECTION (1)(cc),
"SEXUAL ACT" MEANS SEXUAL CONTACT, SEXUAL INTRUSION, OR SEXUAL
PENETRATION AS DEFINED IN SECTION 18-3-401.

(dd) HAS FAILED TO NOTIFY THE BOARD, IN WRITING AND WITHIN
THIRTY DAYS AFTER A JUDGMENT OR SETTLEMENT IS ENTERED, OF A FINAL
JUDGMENT BY A COURT OF COMPETENT JURISDICTION AGAINST THE
LICENSEE FOR MALPRACTICE OF NURSING OR A SETTLEMENT BY THE
LICENSEE IN RESPONSE TO CHARGES OR ALLEGATIONS OF MALPRACTICE OF
NURSING AND, IN THE CASE OF A JUDGMENT, HAS FAILED TO INCLUDE IN
OF ALL PARTIES TO THE ACTION;

(ee) FAILS TO REPORT TO THE BOARD, WITHIN THIRTY DAYS AFTER
AN ADVERSE ACTION, THAT AN ADVERSE ACTION HAS BEEN TAKEN
AGAINST THE PERSON BY ANOTHER LICENSING AGENCY IN ANOTHER STATE
OR JURISDICTION, A PEER REVIEW BODY, A HEALTH CARE INSTITUTION, A
PROFESSIONAL OR NURSING SOCIETY OR ASSOCIATION, A GOVERNMENTAL
AGENCY, A LAW ENFORCEMENT AGENCY, OR A COURT FOR ACTS OR
CONDUCT THAT WOULD CONSTITUTE GROUNDS FOR DISCIPLINARY OR
ADVERSE ACTION AS DESCRIBED IN THIS ARTICLE 255;

(ff) FAILS TO REPORT TO THE BOARD, WITHIN THIRTY DAYS, THE
SURRENDER OF A LICENSE OR OTHER AUTHORIZATION TO PRACTICE
NURSING IN ANOTHER STATE OR JURISDICTION OR THE SURRENDER OF
MEMBERSHIP ON ANY NURSING STAFF OR IN ANY NURSING OR
PROFESSIONAL ASSOCIATION OR SOCIETY WHILE UNDER INVESTIGATION BY
ANY OF THOSE AUTHORITIES OR BODIES FOR ACTS OR CONDUCT SIMILAR TO
ACTS OR CONDUCT THAT WOULD CONSTITUTE GROUNDS FOR ACTION AS
DESCRIBED IN THIS ARTICLE 255; OR

(gg) IS DIVERTING OR HAS DIVERTED A CONTROLLED SUBSTANCE, AS DEFINED IN SECTION 18-18-102 (5), OR ANY OTHER DRUG HAVING SIMILAR EFFECTS FROM THE PERSON'S PLACE OF EMPLOYMENT.

SECTION 5. In Colorado Revised Statutes, add 12-255-135 as follows:

12-255-135. Confidential agreement to limit practice.

(1) EXCEPT AS SPECIFIED IN SUBSECTION (2) OF THIS SECTION, SECTION 12-30-108 CONCERNING CONFIDENTIAL AGREEMENTS TO LIMIT PRACTICE APPLIES TO THIS ARTICLE 255.

(2) THIS SECTION AND SECTION 12-30-108 DO NOT APPLY TO A NURSE SUBJECT TO DISCIPLINE UNDER SECTION 12-255-120 (1)(i).

SECTION 6. In Colorado Revised Statutes, add 10-1-120.5 as follows:

10-1-120.5. Reporting of malpractice claims against nurses.

(1) EACH INSURANCE COMPANY LICENSED TO DO BUSINESS IN THIS STATE AND ENGAGED IN WRITING MALPRACTICE INSURANCE FOR NURSES SHALL SEND TO THE STATE BOARD OF NURSING, IN THE FORM PRESCRIBED BY THE COMMISSIONER, INFORMATION RELATING TO EACH MALPRACTICE CLAIM AGAINST A LICENSED NURSE THAT IS SETTLED OR IN WHICH JUDGMENT IS RENDERED AGAINST THE INSURED.

(2) THE INFORMATION MUST INCLUDE INFORMATION DEEMED NECESSARY BY THE STATE BOARD OF NURSING TO CONDUCT A FURTHER INVESTIGATION AND HEARING.

SECTION 7. In Colorado Revised Statutes, amend 13-64-303 as follows:

13-64-303. Judgments and settlements - reported. Any final
judgment, settlement, or arbitration award against any health care professional or health care institution for medical malpractice shall be reported within fourteen days by such professional's or institution's medical malpractice insurance carrier in accordance with section 10-1-120, 10-1-120.5, 10-1-121, 10-1-124, or 10-1-125, C.R.S.; or by such professional or institution if there is no commercial medical malpractice insurance coverage to the licensing agency of the health care professional or health care institution for review, investigation, and, where appropriate, disciplinary or other action. Any health care professional, health care institution, or insurance carrier that knowingly fails to report as required by this section shall be subject to a civil penalty of not more than two thousand five hundred dollars. Such penalty shall be determined and collected by the district court in the city and county of Denver. All penalties collected pursuant to this section shall be transmitted to the state treasurer, who shall credit the same to the general fund.

SECTION 8. In Colorado Revised Statutes, 25-51-104, amend (1)(c) and (1)(e) as follows:

25-51-104. Payment and financial resolution. (1) If a patient accepts an offer of compensation made pursuant to section 25-51-103 (5) and receives the compensation, the payment of compensation to the patient is not a payment resulting from:

(c) A malpractice claim settled or in which judgment is rendered against a professional for purposes of reporting by malpractice insurance companies under section 10-1-120, 10-1-120.5, 10-1-121, 10-1-124, 10-1-125, or 10-1-125.5;

(e) A judgment, administrative action, settlement, or arbitration

SECTION 9. In Colorado Revised Statutes, 12-255-104, amend (1), (8)(a), and (8)(b) as follows:

12-255-104. Definitions. As used in this article 255, unless the context otherwise requires:

(1) "Advanced practice REGISTERED nurse" means an advanced practice registered nurse who is a REGISTERED professional nurse and who is licensed to practice pursuant to this article 255, who obtains specialized education or training as provided in this section SECTION 12-255-111, and who applies to and is accepted by the board for inclusion in the advanced practice registry ESTABLISHED PURSUANT TO SECTION 12-255-111.

(8) (a) "Practice of advanced practice REGISTERED nursing" means an expanded scope of professional nursing in a scope, role, and population focus approved by the board, with or without compensation or personal profit, and includes the practice of professional nursing.

(b) "Practice of advanced practice REGISTERED nursing" includes prescribing medications as may be authorized pursuant to section 12-255-112.

SECTION 10. In Colorado Revised Statutes, 12-255-105, amend (1)(a) introductory portion and (1)(a)(II)(D) as follows:

12-255-105. State board of nursing created - removal of board
members - meetings of board. (1) (a) There is hereby created the state board of nursing in the division, which board shall consist of eleven members who are residents of this state, appointed by the governor as follows:

(II) Seven members of the board shall be licensed professional nurses who are actively employed in their respective nursing professions and licensed in this state. The professional nurse members shall have been employed for at least three years in their respective categories. Members shall be as follows:

(D) One member shall be registered as an advanced practice registered nurse pursuant to section 12-255-111;

SECTION 11. In Colorado Revised Statutes, 12-255-107, amend (1)(b)(I) as follows:


(1) The board has the following powers and duties:

(b) (I) To examine, license, reactivate, and renew licenses of qualified applicants and to grant to the applicants temporary licenses and permits to engage in the practice of practical nursing and professional nursing in this state within the limitations imposed by this article 255. Licenses issued pursuant to this article 255 are subject to the renewal, expiration, reinstatement, and delinquency fee provisions specified in section 12-20-202 (1) and (2). The director may increase fees to obtain or renew a professional nurse license or advanced practice registered nurse authority consistent with section 12-30-105 (4) to fund the division's costs in administering and staffing the nurse-physician advisory task force for Colorado health care created in section 12-30-105 (1). Any person whose license has expired shall be subject to the penalties
provided in this article 255 or section 12-20-202 (1).

SECTION 12. In Colorado Revised Statutes, 12-255-111, amend (2), (3)(c)(I), (4), (5), (6)(a) introductory portion, and (6)(b)(I) as follows:

12-255-111. Requirements for advanced practice registered nurse registration - legislative declaration - advanced practice registry - rules. (2) The board shall establish the advanced practice registry and shall require that a nurse applying for registration identify his or her THE NURSE'S role and population focus. The board shall establish reasonable criteria for designation of specific role and population foci based on currently accepted professional standards. A nurse who is included in the advanced practice registry has the right to use the title "advanced practice REGISTERED nurse" or, if authorized by the board, to use the title "certified nurse midwife", "clinical nurse specialist", "certified registered nurse anesthetist", or "nurse practitioner". These titles may be abbreviated as "A.P.N.", "A.P.R.N", "C.N.M.", "C.N.S.", "C.R.N.A.", or "N.P.", respectively. It is unlawful for any person to use any of the titles or abbreviations listed in this subsection (2) unless included in the registry and authorized by the board to do so.

(3) (c) A professional nurse may be included in the advanced practice registry by endorsement if the professional nurse meets one of the following qualifying standards:

(I) The professional nurse is recognized as an advanced practice REGISTERED nurse in another state or jurisdiction and has practiced as an advanced practice REGISTERED nurse for at least two of the last five years immediately preceding the date of application for inclusion in the advanced practice registry; or

(4) A nurse who meets the definition of advanced practice
REGISTERED nurse and the requirements of section 12-255-112 may be
granted prescriptive authority as a function in addition to those defined
in section 12-255-104 (10).

(5) An advanced practice REGISTERED nurse shall practice in
accordance with the standards of the appropriate national professional
nursing organization and have a safe mechanism for consultation or
collaboration with a physician or, when appropriate, referral to a
physician. Advanced practice REGISTERED nursing also includes, when
appropriate, referral to other health care providers.

(6) (a) In order to enhance the cost efficiency and continuity of
care, an advanced practice REGISTERED nurse may, within his or her THE
NURSE’S scope of practice and within the advanced practice REGISTERED
nurse-patient relationship, sign an affidavit, certification, or similar
document that:

(b) The affidavit, certification, or similar document may not:

(I) Be the prescription of medication unless the advanced practice
REGISTERED nurse has been granted prescriptive authority pursuant to
section 12-255-112; or

SECTION 13. In Colorado Revised Statutes, 12-255-112, amend
(1), (3)(a), (3)(b)(I), (4)(a) introductory portion, (4)(a)(VI), (4)(b)
introductory portion, (4)(b)(I), (4)(b)(II) introductory portion, (4)(b)(III),
(4)(b)(IV), (4)(c), (4)(d), (4)(e), (5), (6)(a), (7)(a), (7)(c)(I), (9), (10), (11),
and (12); and add (4)(f) as follows:

12-255-112. Prescriptive authority - advanced practice
registered nurses - limits on opioid prescriptions - rules - financial
benefit for prescribing prohibited - repeal. (1) The board may
authorize an advanced practice REGISTERED nurse who is listed on the
advanced practice registry, has a license in good standing without
disciplinary sanctions issued pursuant to section 12-255-110, and has
fulfilled requirements established by the board pursuant to this section to
prescribe controlled substances or prescription drugs as defined in part 1
of article 280 of this title 12 SECTION 12-280-103.

(3) (a) An advanced practice REGISTERED nurse may be granted
authority to prescribe prescription drugs and controlled substances to
provide treatment to clients within the role and population focus of the
advanced practice REGISTERED nurse.

(b) (I) An advanced practice REGISTERED nurse who has been
granted authority to prescribe prescription drugs and controlled
substances under this article 255 may advise the nurse's patients of their
option to have the symptom or purpose for which a prescription is being
issued included on the prescription order.

(4) (a) An advanced practice REGISTERED nurse applying for
prescriptive authority shall provide evidence to the board of the
following:

(VI) A signed attestation that states he or she STATING THAT THE
ADVANCED PRACTICE REGISTERED NURSE has completed at least three
years of combined clinical work experience as a professional nurse or as
an advanced practice REGISTERED nurse.

(b) Upon satisfaction of the requirements set forth in subsection
(4)(a) of this section, the board may grant provisional prescriptive
authority to an advanced practice REGISTERED nurse. The provisional
prescriptive authority that is granted is limited to those patients and
medications appropriate to the advanced practice REGISTERED nurse's role
and population focus. In order to retain provisional prescriptive authority
and obtain and retain full prescriptive authority pursuant to this subsection (4) for patients and medications appropriate for the advanced practice REGISTERED nurse's role and population focus, an advanced practice REGISTERED nurse shall satisfy the following requirements:

(I) (A) Once the provisional prescriptive authority is granted, the advanced practice REGISTERED nurse must obtain one thousand hours of documented experience in a mutually structured prescribing mentorship either with a physician or with an advanced practice REGISTERED nurse who has full prescriptive authority and experience in prescribing medications. The mentor must be practicing in Colorado and have education, training, experience, and an active practice that corresponds with the role and population focus of the advanced practice REGISTERED nurse.

(B) Remote communication with the mentor is permissible within the mentorship as long as the communication is synchronous. Synchronous communication does not include communication by e-mail.

(C) The physician or advanced practice REGISTERED nurse serving as a mentor shall not require payment or employment as a condition of entering into the mentorship relationship, but the mentor may request reimbursement of reasonable expenses and time spent as a result of the mentorship relationship.

(D) Upon successful completion of the mentorship period, the mentor shall provide his or her THE MENTOR'S signature and attestation to verify that the advanced practice REGISTERED nurse has successfully completed the mentorship within the required period after the provisional prescriptive authority was granted.

(E) If an advanced practice REGISTERED nurse with provisional
prescriptive authority fails to complete the mentorship required by this subsection (4)(b)(I) within three years or otherwise fails to demonstrate competence as determined by the board, the advanced practice REGISTERED nurse's provisional prescriptive authority expires for failure to comply with the statutory requirements.

(II) The advanced practice REGISTERED nurse with provisional prescriptive authority shall develop an articulated plan for safe prescribing that documents how the advanced practice REGISTERED nurse intends to maintain ongoing collaboration with physicians and other health care professionals in connection with the advanced practice REGISTERED nurse's practice of prescribing medication within his or her THE ADVANCED PRACTICE REGISTERED NURSE'S role and population focus. The articulated plan shall guide the advanced practice REGISTERED nurse's prescriptive practice. The physician or advanced practice REGISTERED nurse that serves as a mentor as described in subsection (4)(b)(I) of this section shall provide his or her THE MENTOR'S signature and attestation on the articulated plan to verify that the advanced practice REGISTERED nurse has developed an articulated plan. DURING THE PERIOD OF PROVISIONAL PRESCRIPTIVE AUTHORITY, the advanced practice REGISTERED nurse shall retain the articulated plan on file, shall review the plan annually, and shall update the plan as necessary. DURING THE PERIOD OF PROVISIONAL PRESCRIPTIVE AUTHORITY, the articulated plan is subject to review by the board, and the advanced practice REGISTERED nurse shall provide the plan to the board upon request. If an advanced practice REGISTERED nurse with provisional prescriptive authority fails to develop the required articulated plan within three years or otherwise fails to demonstrate competence as determined by the board, the advanced practice REGISTERED nurse's
provisional prescriptive authority expires for failure to comply with the statutory requirements. An articulated plan developed pursuant to this subsection (4)(b)(II) must include at least the following:

(III) The advanced practice REGISTERED nurse shall maintain professional liability insurance as required by section 12-255-113.

(IV) The advanced practice REGISTERED nurse shall maintain national certification, as specified in subsection (4)(a)(III) of this section, unless the board grants an exception.

(c) An advanced practice REGISTERED nurse who was granted prescriptive authority prior to July 1, 2010, shall satisfy the following requirements in order to retain prescriptive authority:

(I) The advanced practice REGISTERED nurse shall develop an articulated plan as specified in subsection (4)(b)(II) of this section; except that to verify development of an articulated plan, the advanced practice REGISTERED nurse shall obtain the signature of either a physician or an advanced practice REGISTERED nurse who has prescriptive authority and experience in prescribing medications, is practicing in Colorado, and has education, training, experience, and active practice that corresponds with the role and population focus of the advanced practice REGISTERED nurse developing the plan.

(II) The advanced practice REGISTERED nurse shall maintain professional liability insurance as required by section 12-255-113.

(III) The advanced practice REGISTERED nurse shall maintain national certification, as specified in subsection (4)(a)(III) of this section, unless:

(A) The advanced practice REGISTERED nurse was included on the advanced practice registry prior to July 1, 2010, and has not obtained
national certification;

   (B) The advanced practice REGISTERED nurse was included on the advanced practice registry prior to July 1, 2008, and has not completed a graduate degree as specified in section 12-255-111 (3)(a); or

   (C) The board grants an exception.

   (d) In order to obtain provisional prescriptive authority and obtain and retain full prescriptive authority in this state, an advanced practice REGISTERED nurse from another state must meet the requirements of this section or substantially equivalent requirements, as determined by the board.

   (e) The board shall conduct random audits of articulated plans to ensure that the plans satisfy the requirements of this subsection (4) and rules adopted by the board.

   (f) Once an advanced practice REGISTERED nurse obtains full prescriptive authority pursuant to this subsection (4), the advanced practice REGISTERED nurse is not required to maintain or update an articulated plan as described in subsection (4)(b)(II) or (4)(c)(I) of this section.

   (5) An advanced practice REGISTERED nurse who obtains prescriptive authority pursuant to this section shall be assigned a specific identifier by the state board of nursing. This identifier shall be available to the Colorado medical board and the state board of pharmacy. The state board of nursing shall establish a mechanism to assure that the prescriptive authority of an advanced practice REGISTERED nurse may be readily verified.

   (6) (a) An advanced practice REGISTERED nurse with prescriptive authority pursuant to this section is subject to the limitations on
(7) (a) The scope of practice for an advanced practice REGISTERED nurse may be determined by the board in accordance with this article 255.

(c) (I) Prescriptive authority by an advanced practice REGISTERED nurse shall be limited to those patients appropriate to the nurse's scope of practice. Prescriptive authority may be limited or withdrawn and the advanced practice REGISTERED nurse may be subject to further disciplinary action in accordance with this article 255 if the nurse has prescribed outside the nurse's scope of practice or for other than a therapeutic purpose.

(9) Nothing in this section shall be construed to permit dispensing or distribution, as defined in section 12-280-103 (14) and (15), by an advanced practice REGISTERED nurse, except for samples, under article 280 of this title 12 and the federal "Prescription Drug Marketing Act of 1987", Pub.L. 100-293, as amended.

(10) No advanced practice REGISTERED nurse registered pursuant to section 12-255-111 shall be required to apply for or obtain prescriptive authority.

(11) Nothing in this section shall limit the practice of nursing by any nurse, including but not limited to, advanced practice REGISTERED nurses.

(12) An advanced practice REGISTERED nurse shall not accept any direct or indirect benefit from a pharmaceutical manufacturer or pharmaceutical representative for prescribing a specific medication to a patient. For the purposes of this section, a direct or indirect benefit does not include a benefit offered to an advanced practice REGISTERED nurse regardless of whether the specific medication is being prescribed.
SECTION 14. In Colorado Revised Statutes, amend 12-255-113 as follows:

(1) It is unlawful for any advanced practice REGISTERED nurse engaged in an independent practice of professional nursing to practice within the state of Colorado unless the advanced practice REGISTERED nurse purchases and maintains or is covered by professional liability insurance in an amount not less than five hundred thousand dollars per claim with an aggregate liability for all claims during the year of one million five hundred thousand dollars.
(2) Professional liability insurance required by this section shall cover all acts within the scope of practice of an advanced practice REGISTERED nurse as defined in this article 255.
(3) Notwithstanding the requirements of subsection (1) of this section, the board, by rule, may exempt or establish lesser liability insurance requirements for advanced practice REGISTERED nurses.
(4) Nothing in this section shall be construed to confer liability on an employer for the acts of an advanced practice REGISTERED nurse that are outside the scope of employment or to negate the applicability of the "Colorado Governmental Immunity Act", article 10 of title 24.

SECTION 15. In Colorado Revised Statutes, 12-255-127, amend (1)(n)(II) and (1)(o) as follows:
12-255-127. Exclusions. (1) No provision of this article 255 shall be construed to prohibit:
(n) (II) The issuance by an advanced practice REGISTERED nurse with prescriptive authority of standing orders and protocols for the use of
epinephrine auto-injectors for emergency use in a public school or nonpublic school pursuant to a policy adopted in accordance with section 22-1-119.5; or

(o) A prescription by an advanced practice REGISTERED nurse with prescriptive authority for the use of epinephrine auto-injectors by an authorized entity in accordance with article 47 of title 25.

SECTION 16. In Colorado Revised Statutes, amend 12-255-128 as follows:

12-255-128. Prescribing opiate antagonists. An advanced practice REGISTERED nurse with prescriptive authority pursuant to section 12-255-112 may prescribe or dispense an opiate antagonist in accordance with section 12-30-110.

SECTION 17. In Colorado Revised Statutes, add 12-255-136 as follows:

12-255-136. Change of name - direction to revisor - repeal.

(1) THE REVISOR OF STATUTES IS AUTHORIZED TO CHANGE ALL REFERENCES TO "ADVANCED PRACTICE NURSE", "ADVANCED PRACTICE NURSING", AND "A.P.N." THAT APPEAR IN THIS ARTICLE 255 AND ELSEWHERE IN THE COLORADO REVISED STATUTES TO "ADVANCED PRACTICE REGISTERED NURSE", "ADVANCED PRACTICE REGISTERED NURSING", AND "A.P.R.N.", RESPECTIVELY.

(2) THIS SECTION IS REPEALED, EFFECTIVE SEPTEMBER 1, 2023.

SECTION 18. In Colorado Revised Statutes, amend 12-255-115 as follows:

12-255-115. Volunteer nurse licensure. (1) The board may issue a license to a retired volunteer nurse who meets the requirements set forth in this section.
(2) A retired volunteer nursing license shall only be issued to an applicant who: is at least fifty-five years of age and:

(a) Currently holds a license to practice nursing, either as a practical nurse or as a professional nurse, and the license is due to expire unless renewed; or

(b) Has retired from the practice of nursing and is not currently engaged in the practice of nursing either full-time or part-time and has, prior to retirement CEASING PRACTICE, maintained full licensure in good standing in any state or territory of the United States.

(3) A nurse who holds a retired volunteer nursing license shall not accept compensation for nursing tasks that are performed while in possession of the license. A retired volunteer nursing license shall permit the retired nurse to engage in volunteer nursing tasks within the scope of the nurse's license.

(4) An applicant for a retired volunteer nursing license shall submit to the board an application containing the information the board may prescribe, a copy of the applicant's most recent nursing license, and a statement signed under penalty of perjury in which the applicant agrees not to receive compensation for any nursing tasks that are performed while in possession of the license.

(5) A person who possesses a retired volunteer nursing license shall be immune from civil liability for actions performed within the scope of the nursing license unless it is established that injury or death was caused by gross negligence or the willful and wanton misconduct of the licensee. The immunity provided in this subsection (5) applies only to the licensee and shall not affect the liability of any other individual or entity. Nothing in this subsection (5) shall be
LIMITS the ability of the board to take disciplinary action against a licensee.

(6) The fee for a retired volunteer nursing license, including assessments for legal defense, peer assistance, and other programs for which licenses are assessed, shall be no more than MUST NOT EXCEED fifty percent of the license renewal fee, including all assessments, established by the board for an active nursing license.

(7) The board shall design a questionnaire to be sent to all retired volunteer nurses who apply for license renewal. Each applicant for license renewal shall complete the board-designed questionnaire. The purpose of the questionnaire is to determine whether a licensee has acted in violation of this article or HAS been disciplined for any action that might be considered a violation of this article or might make the licensee unfit to practice nursing with reasonable care and safety. If an applicant fails to answer the questionnaire accurately, the failure shall constitute CONSTITUTES grounds for discipline under section 12-255-1201(v). The board may include the cost of developing and reviewing the questionnaire in the fee paid under subsection (6) of this section. The board may refuse DENY an application for license renewal that does not accompany an accurately completed questionnaire.

(8) The board shall deny an application for the reactivation of a practical or professional nurse license for a retired volunteer nurse if the board determines that the nurse requesting reactivation has not actively volunteered as a nurse for the two-year period immediately preceding the filing of the application for license reactivation or has not otherwise demonstrated continued competency to return to the active practice of nursing in a manner approved by the board.
SECTION 19. In Colorado Revised Statutes, 13-21-115.5, amend (3)(c)(II)(F) as follows:

13-21-115.5. Volunteer service act - immunity - exception for operation of motor vehicles - definitions. (3) As used in this section, unless the context otherwise requires:

(c) (II) "Volunteer" includes:

(F) A licensed retired volunteer nurse governed by the provisions of article 255 of title 12 performing volunteer nursing tasks within the scope of the person's nursing license, as described in section 12-255-115, as a volunteer for a nonprofit organization, a nonprofit corporation, a governmental entity, or a hospital;

SECTION 20. In Colorado Revised Statutes, amend 12-255-106 as follows:

12-255-106. Employees - executive administrator. After consultation with the board, The director shall appoint an executive administrator for the board and other personnel deemed necessary, pursuant to section 13 of article XII of the state constitution. At least one member of the board shall serve on any panel convened by the department of personnel to interview candidates for the position of executive administrator.

SECTION 21. In Colorado Revised Statutes, 12-20-404, add (1)(d)(II)(J.5) as follows:

12-20-404. Disciplinary actions - regulator powers - disposition of fines. (1) General disciplinary authority. If a regulator determines that an applicant, licensee, certificate holder, or registrant has committed an act or engaged in conduct that constitutes grounds for discipline or unprofessional conduct under a part or article of this title 12
governing the particular profession or occupation, the regulator may:

(d) (II) A regulator is not authorized under this subsection (1)(d) to refuse to renew the license, certification, or registration of a licensee, certificate holder, or registrant regulated under the following:

(J.5) ARTICLE 255 OF THIS TITLE 12 CONCERNING NURSES;

SECTION 22. In Colorado Revised Statutes, 12-255-110, amend (3) as follows:

12-255-110. Requirements for professional nurse licensure - rules. (3) The board shall design a questionnaire to be sent to all licensees who apply for license renewal. Each applicant for license renewal shall complete the board-designed questionnaire. The purpose of the questionnaire is to determine whether a licensee has acted in violation of this article 255 or HAS been disciplined for any action that might be considered a violation of this article 255 or might make the licensee unfit to practice nursing with reasonable care and safety. The board shall include on the questionnaire a question regarding whether the licensee has complied with section 12-30-111. If an applicant fails to answer the questionnaire accurately, the failure constitutes grounds for discipline under section 12-255-120 (1)(v). The board may include the cost of developing and reviewing the questionnaire in the fee paid under subsection (1)(d) of this section. The board may refuse an application for license renewal that does not accompany an accurately completed questionnaire.

SECTION 23. In Colorado Revised Statutes, 12-255-114, amend (3) as follows:

12-255-114. Requirements for practical nurse licensure - rules. (3) The board shall design a questionnaire to be sent to all licensed
practical nurses who apply for license renewal. Each applicant for license renewal shall complete the board-designed questionnaire. The purpose of the questionnaire is to determine whether a licensee has acted in violation of this article 255 or has been disciplined for any action that might be considered a violation of this article 255 or might make the licensee unfit to practice nursing with reasonable care and safety. If an applicant fails to answer the questionnaire accurately, the failure shall constitute grounds for discipline under section 12-255-120 (1)(v). The board may include the cost of developing and reviewing the questionnaire in the fee paid under subsection (1)(d) of this section. The board may refuse an application for license renewal that does not accompany an accurately completed questionnaire.

SECTION 24. In Colorado Revised Statutes, 12-255-121, amend (2)(a)(II), (2)(a)(III), (2)(b) introductory portion, and (2)(c) as follows:

12-255-121. Withholding or denial of license - hearing - definitions. (2) (a) (II) The board may refuse to issue a license or temporary license to practice as a nurse to any applicant during the time the applicant’s license is under suspension in another state.

(III) The board may refuse to issue a license or may grant a license subject to terms of probation if the board determines that an applicant for a license has not actively practiced practical or professional nursing, or has not otherwise maintained continued competency, as determined by the board, during the two years immediately preceding the application for licensure under this article 255.

(b) If the board refuses to issue a license to an applicant pursuant to subsection (2)(a) of this section, the provisions of section 24-4-104 (9) shall apply. Upon the refusal, the board shall
provide the applicant with a statement in writing setting forth the
following:

(c) If the board refuses to issue a license to an applicant
on the grounds that the applicant's nursing or other health care occupation
license was revoked by another legally authorized board, the board may
require the applicant to pass a written examination as provided in section
12-255-109 as a prerequisite to licensure. The applicant shall not be
allowed to take the written examination until at least two years after the
revocation of the nursing or other health care occupation license.

SECTION 25. In Colorado Revised Statutes, 12-255-118, repeal
(4) as follows:

12-255-118. Approval of education programs. (4) Any
educational program for practical or professional nurses in this state that
was accredited by the former boards of nursing prior to July 1, 1980, shall
be deemed to be an approved education program for the purpose of this
article 255, but the approval shall be subject to the powers and duties of
the board under section 12-255-107 to deny or to withdraw approval.

SECTION 26. Effective date. This act takes effect July 1, 2020.

SECTION 27. Safety clause. The general assembly hereby finds,
determines, and declares that this act is necessary for the immediate
preservation of the public peace, health, or safety.