

Aligning Issues Around At-Risk Persons



Background

House Bill 16-1394 (HB 1394) implements the recommendations of the At-Risk Adults with Intellectual and Developmental Disabilities (IDD) Mandatory Reporting Implementation Task Force. The Task Force was created by Senate Bill 15-109 and charged with studying and preparing recommendations for the implementation of mandatory reporting of mistreatment, abuse, neglect or exploitation of at-risk adults with intellectual and developmental disabilities in Colorado. The task force submitted a report of its findings and recommendations to the Governor and to the Joint Budget Committee of the Colorado General Assembly, the Health and Human Services Committee of the Colorado Senate and to the Public Health Care and Human Services Committee of the Colorado House of Representatives on Nov. 30, 2015.

What You Need to Know

Most notably for hospitals and health systems, HB 1394 expands the list of mandatory reporters that are required to report the mistreatment of an at-risk person with IDD or at-risk elders to include:

- Any person providing health care or health-care-related services, including general medical, surgical or nursing services, medical, surgical or nursing specialty services; dental services, vision services; pharmacy services; chiropractic services; or physical, occupational, musical or other therapies;
- Hospital and long-term care facility personnel engaged in the admission, care or treatment of patients;
- First responders including emergency medical service providers, medical examiners and coroners, psychologists, addiction counselors, professional counselors, marriage and family therapists and registered psychotherapists;
- Social workers, staff of community-centered boards; staff, consultants or independent contractors of any publicly or privately operated program, organization or business providing services or supports for persons with intellectual and developmental disabilities;
- Staff or consultants for a licensed or unlicensed, certified or uncertified, care facility, agency, home or governing board, including but not limited to long-term care facilities, home care agencies or home health providers;
- Persons performing case management or assistant services for at-risk elders or at-risk adults with IDD;
- Employees, contractors and volunteers operating specialized transportation services for at-risk elders and at-risk adults with IDD; and
- Clergy.

In addition, the law:

- Standardizes statutory definitions related to at-risk persons and the mistreatment of at-risk persons, including persons with IDD;
- Expands the penalty that can be imposed by the court on a person convicted of mistreatment of an at-risk person to include the payment of treatment costs and restitution;
- Reduces the amount of time local law enforcement agencies or county departments must prepare a written report on at-risk person mistreatment from 48 to 24 hours;
- Removes the provision of law stating that bank and financial service personnel are only required to report mistreatment of an at-risk adult with IDD or elder if it is directly observed;
- Clarifies that if a county determines an investigation into the mistreatment is needed, the county department of human services or social services must conduct the investigation; and
- Clarifies that the human rights committee is responsible for ensuring that an investigation occurs for mistreatment of an adult with IDD who is receiving services through the Office of Community Living in the Department of Health Care Policy and Financing.

Additional Resources

- [HB 1394 Fiscal Note](#)
- HB 1394 took effect on July 1, 2016.

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