

Legislative Council Staff

Nonpartisan Services for Colorado's Legislature

Memorandum

September 24, 2025

TO: Interested Persons

FROM: Kristine McLaughlin, Fiscal Analyst, 303-866-4776

SUBJECT: Medical Aid in Dying

This memorandum provides an overview of Colorado's Medical Aid-in-Dying law, which legalized the practice of prescribing medical aid-in-dying medication to eligible terminally ill patients in Colorado.¹

The Colorado End-of-Life Options Act

Colorado voters approved the <u>Colorado End-of-Life Options Act by ballot initiative</u>, and the law became effective in December 2016. <u>Senate Bill 24-068</u> updated the act and took effect on August 7, 2024.

The act legalizes the process of medical aid-in-dying in Colorado. Medical aid-in-dying (MAID) is the process of meeting legal requirements and prescribing medication that qualified individuals may self-administer to bring about death.

MAID Requirements

The act places several qualifying, procedural, and reporting requirements on patients and providers to ensure that the process is only undertaken willingly by terminally ill patients with a prognosis of less than 6 months.

Qualifying Requirements

To voluntarily request and receive a prescription for MAID medication, an individual must:

- be an adult resident of Colorado;
- have a diagnosis of a terminal illness with six months or less to live; and

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¹ Section 25-48-101, et seg., C.R.S.



 be determined to be mentally capable of making and communicating an informed decision to his or her health care provider.

Procedural Requirements

The law contains detailed information on the steps that an attending provider and his or her patient must complete before a prescription for MAID medication may be dispensed;

- the patient must make two oral requests for MAID medication at least 7 days apart, unless their prognosis is less than 48 hours, in which case the requests can be made at the same time.
- the patient must make a written request for MAID medication witnessed by at least two other persons;
- an attending provider must attest that the patient is eligible to receive MAID medication;
 and
- a consulting provider must confirm the patient's condition and diagnosis.

If either provider doubts the patient's mental competence, they must refer the determination to a mental health provider.

An "attending provider" is a physician or advanced practice registered nurse who has primary responsibility for the care and treatment of the patient. A "consulting provider" is a physician or advanced practice registered nurse who is qualified by specialty or experience to make a professional diagnosis regarding the terminal illness.

The proper form for a written request for MAID is included within the text of the law.

Prior to SB 24-068, the waiting period between oral requests was 15 days and only physicians, not advanced practice nurses, could fulfill provider MAID responsibilities.

Reporting Requirements

If a prescription for MAID medication is written for a patient, the patient's health care providers are required to submit two forms to CDPHE. Both forms are publicly available on the <u>CDPHE</u> <u>Medical Aid in Dying webpage</u> and can be mailed or emailed when completed. CDPHE is required to use this information to ensure documentation requirements outlined in state law are met and provide a <u>publically available annual statistical report</u>.



The attending provider must complete a form that documents completion of the required steps taken to comply with the law. This form must be submitted within 30 days of writing a prescription. These steps include, but are not limited to:

- attesting that the patient made two oral requests and one written request for the medication;
- documentation on the patient's diagnosis, prognosis, and mental capacity;
- notation of the medication and dosage prescribed; and
- information on the consulting provider's diagnosis.

The provider who dispenses the medication to a patient must complete a form with information on the patient, prescribing and dispensing health care providers, and medication dispensed. This form must be completed within ten calendar days of dispensing the medication.²

Additional Legal Specifications

In addition to the MAID requirements, the act specifies legal protections and prohibitions.

Voluntary participation by health care providers

Under the law, health care providers and facilities may choose whether to participate in MAID and are not subject to professional or criminal repercussions based on that choice. Facilitates may prohibit employed or contracted providers from prescribing MAID medication on the premises if it notified the provider of the policy when they were hired and on a yearly basis thereafter. Facilities may not prohibit a provider from providing information regarding a patient's health status. Providers who are unable or unwilling to carry out a request for MAID medication must notify the patient of this determination and, upon request, transfer medical records to a new health care provider.

Criminal penalties and immunities

The law created new penalties for persons who abuse the MAID process, while also granting criminal and civil immunities for persons unless they act with negligence, recklessness, or intentional misconduct. The law creates a class 2 felony for knowingly coercing a terminally ill person to request medication or for tampering with a request for medication.

² 6 CCR 1009-4.



Health insurance coverage

Medical insurance carriers, including Medicaid and Medicare, are not required to cover MAID medication, so individual patients must check with their insurance company about coverage. Carriers are prohibited from coercing a request for MAID.

Severability

The act cannot prevent the state from receiving federal funds. With the passage of SB 24-068, the act specifies that if any part of the act conflicts with federal requirements for the receipt of federal funds, the conflicting section is inoperative.

Additional Resources

<u>Compassion and Choices</u>, a national nonprofit organization committed to improving care and expanding choice at the end of life, provides information on facilities that participate in MAID.