## First Regular Session Seventy-fifth General Assembly STATE OF COLORADO

## **PREAMENDED**

This Unofficial Version Includes Committee Amendments Not Yet Adopted on Second Reading

LLS NO. 25-0120.02 Owen Hatch x2698

**HOUSE BILL 25-1259** 

#### **HOUSE SPONSORSHIP**

Froelich and Brown,

#### SENATE SPONSORSHIP

Cutter and Daugherty,

# **House Committees**

#### **Senate Committees**

Health & Human Services Appropriations

|     | A BILL FOR AN ACT                                    |
|-----|--|
| 101 | CONCERNING ASSISTED REPRODUCTION, AND, IN CONNECTION |
| 102 | THEREWITH, ADOPTING IN VITRO FERTILIZATION AND OTHER |
| 103 | ASSISTED REPRODUCTION AND FERTILITY PROTECTIONS AND  |
| 104 | ELIMINATING OTHER ADMINISTRATIVE REQUIREMENTS.       |

### **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 <a href="http://leg.colorado.gov">http://leg.colorado.gov</a>.)

The bill adds statutory protections for in vitro fertilization and other assisted reproductive procedures.

Current law requires gamete banks and fertility clinics (donor

banks) to maintain donor identifying information and update it every 3 years. The bill requires donor banks to collect identifying information and medical history from the gamete donor only at the initial donation.

Current law prohibits donor banks from prohibiting an adult donor-conceived person from communicating about the gamete donor with the donor-conceived person's friends, family, or other third parties. The bill eliminates that prohibition.

The bill repeals certain provisions relating to gamete donor record stewardship in the event of donor bank dissolution, bankruptcy, or insolvency and eliminates the requirement that donor banks inform a recipient parent about future implications about a gamete donor's medical history or other persons conceived using the same gamete donor.

Current law requires the department of public health and environment (department) to draft written materials that must be provided to individuals prior to donating or receiving gametes. The bill removes the responsibility from the department and requires donor banks to create the materials.

Current law requires donor recipients to update and inform donor banks regarding live births using donated gametes. The bill allows donor banks to only recommend this step to recipients of donor gametes.

Donor bank licensure renewal is extended from annually to once every 5 years. The requirement that the department investigate donor banks outside the state of Colorado is eliminated, and the fine for donor banks that are out of compliance is modified from an automatic \$20,000 per-day fine to a fine to be determined by the state board of health.

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

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SECTION 1. Short title. The short title of this act is the "Reducing Barriers to Building Families Act".

4 **SECTION 2. Legislative declaration.** (1) The general assembly finds that:

- (a) On February 16, 2024, the Alabama supreme court ruled that embryos formed through in vitro fertilization, or IVF, are considered children under the state's "Wrongful Death of a Minor Act";
- (b) The court's 131-page opinion held that the act applies to all unborn children, regardless of their location. The chief justice of Alabama quoted the Bible and stated that embryos are children in cryogenic

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nurseries. The result was that medical professionals performing IVF could be legally prosecuted for manslaughter if an embryo was destroyed.

- (c) The ruling raised great concerns about the impact on, in particular, provision of women's health-care services, fertility care for all individuals, and assisted reproductive technologies. Many legal and medical experts across the country, including in Colorado, believe the ruling, in ways similar to what has happened in Alabama, will interfere nationwide with women's access to medical care, including necessary medical care following miscarriages; will make it difficult for people to undergo fertility care, including IVF and embryo transfer; could end or severely limit IVF medical treatments; and could interfere with individuals even transferring their embryos to clinics outside of our state.
- (d) After the ruling, IVF clinics in Alabama ceased providing infertility medical services and also ceased transferring embryos owned by their patients to clinics outside of Alabama due to potential legal and felony risks if an embryo was inadvertently destroyed.
- (2) (a) The Alabama ruling, coupled with new, intrusive, and difficult-to-implement requirements for gamete donation, has had negative impacts on people seeking fertility treatments in Colorado.
- (b) Colorado has been recognized for decades as a medical destination for those seeking sophisticated and cutting-edge medical care for infertility. Colorado's fertility clinics are highly respected; the state's medical practitioners are known as pioneers in assisted reproductive technologies, or ART medical care; and Colorado continues to advance and provide top-notch ART fertility care.
- (c) Equally matching its sophisticated ART medical care, Colorado also ranks highly among all states due to its progressive laws

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and legal protections for children born through assisted reproductive technologies, laws that ensure donors of gametes (ova and sperm) and embryos are not considered legal parents of any resulting children, and the laws protect the parental rights of parents whose children are born through ART, including through donated gametes and surrogacy. Children born through ART in Colorado legally are able to know who their parents are from the moment of birth, and potential parents are likewise safeguarded due to Colorado's protections, including not requiring a genetic relationship between parent and child and not requiring parents to be married, and including opposite gender individuals' access to ART, making Colorado a top choice for domestic and international individuals seeking assisted reproduction medical care treatment options.

- (3) Therefore, the general assembly declares that:
- (a) Colorado should remain a world-class destination for all people who want to start a family, providing safe, cutting-edge medical care for individuals in need of those services;
- (b) It is also important to keep the transparency and rules around disclosure in order to address the concerns of donor-conceived individuals while preserving the whole ecosystem of Colorado's world-class assisted reproduction technologies, infertility medical care options, and gamete donation medical environment; and
- (c) Recent legislation in Colorado has been challenging to implement and has had a chilling effect on donations, as individuals are daunted by the invasive reporting requirements. This act seeks to streamline implementation of the provisions of the "Donor-Conceived Persons Protection Act" while preserving the important transparency and

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| 1  | reporting requirements.  |
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| 2  | SECTION 3. In Colorado Revised Statutes, add 25-57-113 as          |
| 3  | follows:   |
| 4  | 25-57-113. Reproductive health care - fertility treatment -        |
| 5  | protections - definitions. (1) As used in this section, unless the |
| 6  | CONTEXT OTHERWISE REQUIRES:  |
| 7  | (a) "FERTILITY TREATMENT" MEANS ANY TEST, PROCEDURE                |
| 8  | MEDICATION, SURGERY, OR SERVICE TO DIAGNOSE, ENHANCE, OR ASSIST    |
| 9  | AN INDIVIDUAL'S ABILITY TO REPRODUCE OR ACHIEVE PREGNANCY          |
| 10 | INCLUDING, BUT NOT LIMITED TO:                                     |
| 11 | (I) IN VITRO FERTILIZATION;  |
| 12 | (II) Intrauterine insemination;                                    |
| 13 | (III) OVULATION INDUCTION;   |
| 14 | (IV) TESTICULAR OR OVARIAN BIOPSY;                                 |
| 15 | (V) EMBRYO BIOPSY;   |
| 16 | (VI) CRYOPRESERVATION AND THAWING OF GAMETES AND                   |
| 17 | EMBRYOS;   |
| 18 | (VII) CRYOPRESERVATION OF TESTICULAR AND OVARIAN TISSUE            |
| 19 | (VIII) STORAGE, DONATION, OR DISPOSAL OF GAMETES, EMBRYOS          |
| 20 | OR REPRODUCTIVE TISSUE;  |
| 21 | (IX) PRE-IMPLANTATION GENETIC TESTING, OR ANY OTHER                |
| 22 | MEDICAL SCREENING OR EVALUATION OF EMBRYOS OR GAMETES;             |
| 23 | (X) DONATION OF SPERM OR EGGS; AND                                 |
| 24 | (XI) SURROGACY.  |
| 25 | (b) "Reproductive health care" means, but is not limited           |
| 26 | TO:  |
| 27 | (I) FAMILY PLANNING;   |

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| 1  | (II) CONTRACEPTION;  |
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| 2  | (III) STERILIZATION;   |
| 3  | (IV) PRE-CONCEPTION CARE;  |
| 4  | (V) MATERNITY CARE;  |
| 5  | (VI) POSTPARTUM CARE;  |
| 6  | (VII) ABORTION CARE;   |
| 7  | (VIII) EMERGENCY CONTRACEPTION;                                  |
| 8  | (IX) FERTILITY SERVICES;   |
| 9  | (X) COUNSELING REGARDING REPRODUCTIVE HEALTH CARE; AND           |
| 10 | (XI) Referral services regarding reproductive health             |
| 11 | CARE.  |
| 12 | (2) (a) EVERY INDIVIDUAL HAS A FUNDAMENTAL RIGHT TO MAKE         |
| 13 | AUTONOMOUS DECISIONS ABOUT THE INDIVIDUAL'S OWN REPRODUCTIVE     |
| 14 | HEALTH, INCLUDING THE FUNDAMENTAL RIGHT TO USE OR REFUSE         |
| 15 | REPRODUCTIVE HEALTH CARE AND THE ABILITY, WITHOUT GOVERNMENT     |
| 16 | RESTRICTION, TO:   |
| 17 | (I) USE GAMETES AND EMBRYOS;                                     |
| 18 | (II) DESTROY GAMETES AND EMBRYOS; OR                             |
| 19 | (III) DONATE GAMETES AND EMBRYOS TO THIRD PARTIES FOR            |
| 20 | PROCREATION OR RESEARCH.   |
| 21 | (b) THE STATE SHALL NOT DENY, RESTRICT, INTERFERE WITH, OR       |
| 22 | DISCRIMINATE AGAINST AN INDIVIDUAL'S EXERCISE OF THE FUNDAMENTAL |
| 23 | RIGHTS SET FORTH IN THIS SUBSECTION (2), INCLUDING INDIVIDUALS   |
| 24 | UNDER STATE CUSTODY, CONTROL, OR SUPERVISION.                    |
| 25 | (3) THE STATE AND LOCAL GOVERNMENTS SHALL NOT INTERFERE          |
| 26 | WITH OR RESTRICT A PHYSICIAN OR LICENSED MEDICAL PROVIDER'S      |
| 27 | ABILITY TO DROVIDE DEDDODUCTIVE HEALTH CADE AS DEFINED IN THIS   |

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| 1  | SECTION.   |
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| 2  | (4) It is contrary to the public policy of this state to                         |
| 3  | PERMIT AN INDIVIDUAL TO BRING A CIVIL OR CRIMINAL ACTION                         |
| 4  | AUTHORIZED IN ANOTHER STATE AGAINST AN INDIVIDUAL IN THIS STATE                  |
| 5  | FOR ENGAGING OR ATTEMPTING TO ENGAGE IN THE FOLLOWING CONDUCT:                   |
| 6  | (a) TERMINATING OR SEEKING TO TERMINATE A PREGNANCY;                             |
| 7  | (b) Performing or inducing the termination of a                                  |
| 8  | PREGNANCY;   |
| 9  | (c) KNOWINGLY ENGAGING IN CONDUCT THAT AIDS OR ABETS THE                         |
| 10 | PERFORMANCE OR INDUCEMENT OF THE TERMINATION OF PREGNANCY;                       |
| 11 | (d) Providing reproductive health care, as defined in this                       |
| 12 | SECTION; OR  |
| 13 | (e) Providing fertility treatment, as defined in this                            |
| 14 | SECTION.   |
| 15 | SECTION 4. In Colorado Revised Statutes, 25-57-104, amend                        |
| 16 | (1); and <b>add</b> (1.5) as follows:  |
| 17 | 25-57-104. Collection of identifying information and medical                     |
| 18 | <b>history - applicability.</b> (1) Except as provided in subsection (3) of this |
| 19 | section, a gamete agency, gamete bank, or fertility clinic that collects         |
| 20 | gametes from a donor or matches a donor with a recipient shall collect the       |
| 21 | donor's identifying information and medical history. and shall make a            |
| 22 | good faith effort to maintain current contact information and updates on         |
| 23 | the medical history of the donor by requesting updates from the donor at         |
| 24 | least once every three years.  |
| 25 | (1.5) (a) A GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC                      |
| 26 |  |
|    | SHALL ENCOURAGE A DONOR TO INFORM THE GAMETE AGENCY, GAMETE                      |

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| 1  | SIGNIFICANT ADVERSE MEDICAL HEALTH IMPLICATION AFTER DONATION.                |
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| 2  | (b) A GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC                         |
| 3  | SHALL ENCOURAGE A RECIPIENT PARENT TO INFORM THE GAMETE AGENCY,               |
| 4  | GAMETE BANK, OR FERTILITY CLINIC IF THE RECIPIENT PARENT'S                    |
| 5  | DONOR-CONCEIVED CHILD EXPERIENCES A CLINICALLY SIGNIFICANT                    |
| 6  | ADVERSE MEDICAL HEALTH IMPLICATION.   |
| 7  | (c) A GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC SHALL                   |
| 8  | DOCUMENT A DONOR OR RECIPIENT PARENT'S REPORT OF A CLINICALLY                 |
| 9  | SIGNIFICANT ADVERSE MEDICAL HEALTH IMPLICATION AFTER DONATION.                |
| 10 | (d) A GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC                         |
| 11 | SHALL DISSEMINATE NOTICE OF A CLINICALLY SIGNIFICANT ADVERSE                  |
| 12 | MEDICAL HEALTH IMPLICATION TO OTHER RECIPIENTS OF THE DONOR'S                 |
| 13 | GAMETES, IN ACCORDANCE WITH THE GUIDELINES FROM THE AMERICAN                  |
| 14 | SOCIETY FOR REPRODUCTIVE MEDICINE.  |
| 15 | SECTION 5. In Colorado Revised Statutes, 25-57-106, amend                     |
| 16 | (1) as follows:   |
| 17 | 25-57-106. Disclosure of identifying information and medical                  |
| 18 | history - applicability. (1) Except as provided in subsection (4) of this     |
| 19 | section, upon the request of a donor-conceived person who is eighteen         |
| 20 | years of age or older, a gamete agency, gamete bank, or fertility clinic that |
| 21 | matched or collected the gametes used in the assisted reproduction of         |
| 22 | such THE donor-conceived person shall provide the donor-conceived             |
| 23 | person with the identifying information of the donor who provided the         |
| 24 | gametes or embryo. A gamete agency, gamete bank, or fertility clinic          |
| 25 | shall not impede or prohibit compliance with this section or                  |
| 26 | communication between:  |
| 27 | (a) An adult donor-conceived person and the donor whose                       |

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| 1  | gametes were used to conceive the donor-conceived person; or                 |
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| 2  | (b) An adult donor-conceived person and the person's friends,                |
| 3  | family, or other third parties about the donor whose gametes were used       |
| 4  | to conceive the donor-conceived person. THE DONOR-CONCEIVED PERSON           |
| 5  | HAS THE RIGHT, IN ACCORDANCE WITH RELEVANT LAWS, TO CONTACT THE              |
| 6  | DONOR. THE DONOR HAS A RIGHT TO RESPOND, ENGAGE, OR DECLINE                  |
| 7  | CONTACT AND COMMUNICATION.   |
| 8  | (c) A GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC IS                     |
| 9  | ENCOURAGED TO PROVIDE INFORMATION TO A DONOR-CONCEIVED PERSON                |
| 10 | REGARDING THE PHYSICAL AND EMOTIONAL RISKS ASSOCIATED WITH                   |
| 11 | PUBLICLY RELEASING A DONOR'S PRIVATE AND SENSITIVE INFORMATION.              |
| 12 | SECTION 6. In Colorado Revised Statutes, 25-57-107, amend                    |
| 13 | (1) introductory portion and (2); and repeal (3), (4), (5), (6), and (7) as  |
| 14 | follows:   |
| 15 | 25-57-107. Record keeping. (1) Except as provided in subsection              |
| 16 | (6) of this section, A gamete agency, gamete bank, or fertility clinic shall |
| 17 | permanently maintain:  |
| 18 | (2) A gamete agency, gamete bank, or fertility clinic that receives          |
| 19 | gametes or embryos from another gamete agency, gamete bank, or               |
| 20 | fertility clinic shall permanently maintain the name, address, telephone     |
| 21 | number, and e-mail address of the gamete agency, gamete bank, or             |
| 22 | fertility clinic from which it received the gametes or embryos. A gamete     |
| 23 | bank or fertility clinic that collected gametes from a donor who was         |
| 24 | matched with a recipient by a gamete agency that is a separate entity shall  |
| 25 | permanently maintain the name, address, telephone number, and e-mail         |
| 26 | address of the gamete agency that matched the donor and the recipient. A     |
| 27 | GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC SHALL CREATE A               |

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| 1  | PLAN TO PERMANENTLY MAINTAIN THE INFORMATION AS REQUIRED BY                  |
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| 2  | THIS SECTION AND SHALL MAKE THE PLAN AVAILABLE FOR INSPECTION                |
| 3  | UPON REQUEST BY THE DEPARTMENT.  |
| 4  | (3) Except as provided in subsection (6) of this section, in its             |
| 5  | application for a license pursuant to section 25-57-110, a gamete agency,    |
| 6  | gamete bank, or fertility clinic shall submit a proposed plan to             |
| 7  | permanently maintain the records described in subsections (1) and (2) of     |
| 8  | this section in the event of dissolution, insolvency, or bankruptcy. The     |
| 9  | plan may include identification of a named entity to receive or maintain     |
| 10 | the records, obtaining a surety bond in favor of a third party in an amount  |
| 11 | sufficient to cover the costs of permanent record keeping, an obligation     |
| 12 | to condition any sale on the acquiring entity's obligation to maintain       |
| 13 | records consistent with this section, or similar methods. The department     |
| 14 | shall not issue a license pursuant to section 25-57-110 until it approves a  |
| 15 | plan that it finds sufficient to ensure that the records will be permanently |
| 16 | maintained by a viable entity.   |
| 17 | (4) Except as provided in subsection (6) of this section, upon               |
| 18 | dissolution, insolvency, or bankruptcy, a gamete agency, gamete bank, or     |
| 19 | fertility clinic shall:  |
| 20 | (a) Implement the plan approved by the department pursuant to                |
| 21 | subsection (3) of this section;  |
| 22 | (b) File with the department a statement providing the name and              |
| 23 | contact information of the successor entity, if any, that will receive and   |
| 24 | maintain the records described in subsections (1) and (2) of this section;   |
| 25 | and  |
| 26 | (c) Inform by mail and electronic mail sent to the last-known                |
| 27 | address on file all gamete donors whose gametes were collected, matched,     |

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| or received by the gamete agency, gamete bank, or fertility clinic, as well   |  |  |
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| as recipient parents who received gametes or embryos from the gamete          |  |  |
| agency, gamete bank, or fertility clinic and reported a pregnancy or live     |  |  |
| birth, the name and contact information of the successor entity that will     |  |  |
| receive and maintain the records described in subsections (1) and (2) of      |  |  |
| this section.   |  |  |
| (5) A gamete agency, gamete bank, or fertility clinic shall comply            |  |  |
| with reporting requirements about gamete screening and testing in             |  |  |
| accordance with federal law and applicable laws of this state other than      |  |  |
| those set forth in this article 57.   |  |  |
| (6) A gamete bank or fertility clinic that collects gametes from a            |  |  |
| donor who was matched with a recipient by a gamete agency that is a           |  |  |
| separate entity is not subject to the requirements of subsection (1), (3), or |  |  |
| (4) of this section.  |  |  |
| (7) (a) Subsection (2) of this section applies only to gametes or             |  |  |
| embryos matched or received on or after July 1, 2024.                         |  |  |
| (b) Subsections (1), (3), and (4) of this section apply only to               |  |  |
| gametes matched or collected on or after January 1, 2025, for use by a        |  |  |
| recipient parent or parents who are unknown to the donor at the time of       |  |  |
| the donation.   |  |  |
| SECTION 7. In Colorado Revised Statutes, 25-57-108, amend                     |  |  |
| (1) introductory portion, (2) introductory portion, and (4) introductory      |  |  |
| portion; and <b>repeal</b> (1)(f) as follows:                                 |  |  |
| 25-57-108. Written materials for recipient parents and gamete                 |  |  |
| donors. (1) On or before January 1, 2025, the department JANUARY 1,           |  |  |
| 2026, GAMETE AGENCIES, GAMETE BANKS, AND FERTILITY CLINICS shall              |  |  |
| develop written materials for intended recipient parents. The department      |  |  |

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shall develop the materials in conjunction with licensed mental health professionals who have prior documented experience counseling gamete donors, recipients, and donor-conceived persons, as well as experience and competency in counseling families with lesbian, gay, bisexual, and transgender parents and single parents, along with organizations representing these communities. The written materials must meet the minimum standards set by the American Society of Reproductive Medicine and the American Academy of Pediatrics regarding assisted reproduction. The materials must include information on the following: subjects:

- (f) Future implications of receiving medical history updates about the donor or other persons conceived with the same donor's gametes.
- (2) On or before January 1, 2025, the department January 1, 2026, Gamete agencies, Gamete Banks, and Fertility Clinics shall develop written materials for gamete donors. The department shall develop the materials in conjunction with licensed mental health professionals who have prior documented experience counseling gamete donors, recipients, and donor-conceived persons, as well as experience and competency in counseling families with lesbian, gay, bisexual, and transgender parents and single parents, along with organizations representing these communities. The written materials must meet the Minimum standards set by the American Society of Reproductive Medicine and the American Academy of Pediatrics regarding assisted reproduction. The materials must include information on the following: subjects:
- (4) A gamete agency, gamete bank, or fertility clinic located outside of Colorado that either matches donors to or provides AN

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1 INDIVIDUAL WHO EITHER MATCHES DONORS OR PROVIDES gametes or 2 embryos to recipients in Colorado shall:

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SECTION 8. In Colorado Revised Statutes, 25-57-109, amend (1)(a); and add (1)(c) as follows:

25-57-109. Donor age limits - limits on number of families per donor - restriction on dissemination of gametes - limits on egg-retrieval cycles per ovum donor - rules - applicability. (1) (a) Except as provided in subsection (4) of this section, a gamete agency, gamete bank, or fertility clinic shall make a good faith effort to determine how many families are established with gametes matched or provided by the gamete agency, gamete bank, or fertility clinic from each donor by conducting sufficient record-keeping, requiring RECOMMENDING recipients as a condition of receiving donor gametes, to provide information on live births, and requesting information from recipients on live births, and using industry best practices, including methods or processes to account for the number or percentage of live births that are likely not reported, such as the correlation between the number of units of donor gametes sold or released and the resulting live births. A gamete agency, gamete bank, or fertility clinic shall not match or provide gametes from a donor to additional families once the gamete agency, gamete bank, or fertility clinic has record of or should reasonably know that twenty-five families have been established using a single donor's gametes in or outside of Colorado, with no limit on the number of children conceived by each of the families, unless the donor requests, and the gamete agency, gamete bank, or fertility clinic agrees to, a lower limit on the number of families. This limit does not include any children conceived by the donor as a parent or children conceived with the donor's gametes when the

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1 donor is known to the recipient parent or parents at the time of the 2 donation. This limit does not include donations of embryos from one 3 family to another family. 4 (c) A GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC SHALL 5 NOT DISSEMINATE A DONOR'S GAMETES TO ANY ADDITIONAL RECIPIENTS 6 WITHOUT THE RECIPIENT'S INFORMED WRITTEN CONSENT IF THE DONOR 7 INFORMS THE GAMETE AGENCY, GAMETE BANK, OR FERTILITY CLINIC THAT 8 THE DONOR EXPERIENCED A CLINICALLY SIGNIFICANT ADVERSE MEDICAL 9 HEALTH IMPLICATION AFTER DONATION. 10 **SECTION 9.** In Colorado Revised Statutes, 25-57-110, amend 11 (2)(a) and (3)(a)(I); and **repeal** (3)(a)(III) as follows: 12 25-57-110. License required - application - inspection -13 issuance, denial, suspension, or revocation - fees - civil penalties -14 rules. (2) (a) A gamete agency, gamete bank, or fertility clinic shall 15 submit an annual application and fee EVERY FIVE YEARS for a license to 16 operate on the form and in the manner prescribed by the department. 17 (3) (a) (I) The department shall investigate and review each 18 original application and each renewal application for a license to operate 19 as a gamete agency, gamete bank, or fertility clinic. The department shall 20 require all applicants to submit information in the original and renewal 21 application process to document compliance with licensing requirements. 22 Subject to available appropriations, the department may, as it deems 23 necessary, perform on-site inspections or complaint investigations of a 24 gamete agency, gamete bank, or fertility clinic located outside of 25 Colorado. The department shall determine an applicant's compliance with 26 this article 57, and the rules adopted pursuant to this article 57, for the 27 collection and provision of gametes from donors who are unknown to a

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recipient at the time of the donation before issuing a license.

(III) When investigating or reviewing the records of a gamete agency, gamete bank, or fertility clinic located outside of Colorado, the department shall investigate and review only the records pertaining to donors whose gametes or embryos were matched or provided to recipients in Colorado.

**SECTION 10. Safety clause.** The general assembly finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, or safety or for appropriations for the support and maintenance of the departments of the state and state institutions.

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