

HOUSE COMMITTEE OF REFERENCE REPORT

\_\_\_\_\_  
Chair of Committee

\_\_\_\_\_  
Date

May 24, 2021

Committee on Appropriations.

After consideration on the merits, the Committee recommends the following:

HB21-1275 be amended as follows, and as so amended, be referred to the Committee of the Whole with favorable recommendation:

- 1 Amend printed bill, page 3, strike lines 21 through 27 and substitute:  
2 "(2) (a) A PHARMACIST IS ELIGIBLE TO RECEIVE REIMBURSEMENT  
3 UNDER THE MEDICAL ASSISTANCE PROGRAM FOR MEDICALLY NECESSARY  
4 SERVICES AUTHORIZED IN PART 6 OF ARTICLE 280 OF TITLE 12 THAT ARE  
5 NOT DUPLICATIVE OF OTHER PHARMACIST SERVICES OR PROGRAMS  
6 REIMBURSED UNDER THE MEDICAL ASSISTANCE PROGRAM.  
7 (b) THE STATE DEPARTMENT SHALL INCLUDE THE SERVICES  
8 REIMBURSED PURSUANT TO SUBSECTION (2)(a) OF THIS SECTION IN THE  
9 REVIEW OF PROVIDER RATES REQUIRED PURSUANT TO SECTION  
10 25.5-4-401.5".
- 11 Page 5, after line 11 insert:  
12 "**SECTION 2.** In Colorado Revised Statutes, **add 25.5-5-327** as  
13 follows:  
14 **25.5-5-327. Federally qualified health center - clinical**  
15 **pharmacy services - reimbursement - rules.** (1) COSTS ASSOCIATED  
16 WITH SERVICES PROVIDED BY CLINICAL PHARMACISTS THROUGH A  
17 FEDERALLY QUALIFIED HEALTH CENTER, AS DEFINED IN THE FEDERAL  
18 "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x (aa)(4), ARE CONSIDERED  
19 ALLOWABLE COSTS FOR THE PURPOSE OF A FEDERALLY QUALIFIED HEALTH  
20 CENTER'S COST REPORT AND MUST BE INCLUDED IN THE CALCULATION OF  
21 THE REIMBURSEMENT RATE FOR A PATIENT VISIT AT A FEDERALLY  
22 QUALIFIED HEALTH CENTER.  
23 (2) THE STATE DEPARTMENT SHALL PROMULGATE RULES TO

1 IMPLEMENT THE PROVISIONS OF THIS SECTION.

2       **SECTION 3. Appropriation.** (1) For the 2021-22 state fiscal  
3 year, \$372,554 is appropriated to the department of health care policy and  
4 financing. This appropriation consists of \$336,097 from the general fund  
5 and \$36,457 cash funds from the healthcare affordability and  
6 sustainability fee cash fund created in section 25.5-4-402.4 (5)(a), C.R.S.  
7 To implement this act, the department may use this appropriation as  
8 follows:

9       (a) \$74,847 from the general fund for use by the executive  
10 director's office for personal services, which amount is based on an  
11 assumption that the office will require an additional 1.6 FTE;

12       (b) \$7,415 from the general fund for use by the executive director's  
13 office for operating expenses;

14       (c) \$95,796 from the general fund for use by the executive  
15 director's office for Medicaid management information system  
16 maintenance and projects; and

17       (d) \$194,496, consisting of \$158,039 from the general fund, which  
18 amount is subject to the "(M)" notation as defined in the annual general  
19 appropriation act for the same fiscal year, and \$36,457 from the  
20 healthcare affordability and sustainability fee cash fund, for medical and  
21 long-term care services for Medicaid eligible individuals.

22       (2) For the 2021-22 state fiscal year, the general assembly  
23 anticipates that the department of health care policy and financing will  
24 receive \$1,348,502 in federal funds to implement this act. The  
25 appropriation in subsection (1) of this section is based on the assumption  
26 that the department will receive this amount of federal funds to be used  
27 as follows:

28       (a) \$74,847, which amount is subject to the "(I)" notation as  
29 defined in the annual general appropriation act for the same fiscal year,  
30 for personal services;

31       (b) \$7,415, which amount is subject to the "(I)" notation as defined  
32 in the annual general appropriation act for the same fiscal year, for  
33 operating expenses;

34       (c) \$862,164, which amount is subject to the "(I)" notation as  
35 defined in the annual general appropriation act for the same fiscal year,  
36 for Medicaid management information system maintenance and projects;  
37 and

38       (d) \$404,076 for medical and long-term care services for Medicaid  
39 eligible individuals."

40 Renumber succeeding section accordingly.

- 1 Page 1, line 102, strike "ACT." and substitute "ACT, AND, IN CONNECTION
- 2 THEREWITH, MAKING AN APPROPRIATION."

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