First Regular Session Seventy-first General Assembly STATE OF COLORADO

REREVISED

This Version Includes All Amendments Adopted in the Second House

LLS NO. 17-0268.01 Kip Kolkmeier x4510 & Kristen Forrestal x4217 HOUSE BILL17-1060

HOUSE SPONSORSHIP

Thurlow, Arndt

SENATE SPONSORSHIP

Tate, Kerr, Moreno

House Committees

Public Health Care & Human Services

Senate Committees

Health & Human Services

A BILL FOR AN ACT

101	CONCERNING	THE	SCHEDULED	REPEAL	OF	REPORTS	BY	THE
102	DEPART	MENT	OF HEALTH CA	ARE POLIC	YAN	D FINANCIN	NG TO) THE
103	GENERA	L ASS	EMBLY.					

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/.)

Statutory Revision Committee. Pursuant to section 24-1-136 (11)(a)(I), Colorado Revised Statutes, any report that is required to be made to the general assembly by an executive agency or the judicial branch on a periodic basis expires on the day after the third anniversary of the date on which the first report was due unless the general assembly,

SENATE rd Reading Unamended February 14, 2017

SENATE 2nd Reading Unamended February 13, 2017

HOUSE
3rd Reading Unamended
January 31, 2017

HOUSE Amended 2nd Reading January 30, 2017

Shading denotes HOUSE amendment. <u>Double underlining denotes SENATE amendment.</u>

Capital letters indicate new material to be added to existing statute.

Dashes through the words indicate deletions from existing statute.

acting by bill, continues the requirement.

Sections 2, 6, 7, 9, and 10 continue indefinitely the reporting requirements contained in those statutory sections.

Sections 1, 3, and 4 of the bill repeal reports from the state department and subsidiary officials that were scheduled to repeal according to section 24-1-136 (11)(a)(I). Currently there is no repeal date listed in the organic statute.

Sections 5 and 8 add a repeal date in the organic statute that coincides with the scheduled repeal date specified in section 24-1-136 (11)(a)(I).

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

SECTION 1. In Colorado Revised Statutes, repeal 25.5-1-113.5

3 as follows:

- 25.5-1-113.5. Children's access to health care reports. (1) On or before January 1, 2008, and on or before each January 1 thereafter, the state department shall submit a report to the health and human services committees of the senate and the house of representatives, or any successor committees, on measures of access to and quality of health care for children eligible for programs pursuant to this title, including but not limited to data showing whether:
- (a) Providers for children are participating in the programs and are accepting eligible children as patients on a regular basis;
- (b) Eligible children are enrolling in programs under this title and are remaining enrolled so that the children have continuity of care;
- (c) Eligible children are receiving the early and periodic screening, diagnosis, and treatment services required by federal law, including but not limited to regular preventive care and, when appropriate, timely specialty care, and that providers are accurately reporting the data from these visits; and
 - (d) Providers are using other appropriate measures of access and

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I	quality to improve health outcomes and maximize the expenditure of
2	health care resources.
3	SECTION 2. In Colorado Revised Statutes, 25.5-1-115.5, amend
4	(1) introductory portion as follows:
5	25.5-1-115.5. Medical assistance client fraud - report.
6	(1) Notwithstanding the provisions of section 24-1-136 (11)(a)(I),
7	on or before January 15, 2013, and on or before January 15 each year
8	thereafter, the state department shall submit a written report to the
9	judiciary committee and the health and environment committee of the
10	house of representatives, or their successor committees, and to the
11	judiciary committee and the health and human services committee of the
12	senate, or their successor committees, relating to fraudulent receipt of
13	medicaid benefits including, at a minimum:
14	SECTION 3. In Colorado Revised Statutes, 25.5-1-123, repeal
15	(3) as follows:
16	25.5-1-123. Medical homes for children - legislative
17	declaration - duties of the department. (3) On or before January 30,
18	2008, and every January 30 thereafter, the state department shall report
19	to the health and human services committees of the house of
20	representatives and the senate, or any successor committees, on progress
21	made toward maximizing the number of children with a medical home
22	who are enrolled in the state medical assistance program or the children's
23	basic health plan.
24	SECTION 4. In Colorado Revised Statutes, 25.5-1-204, amend
25	(4); and repeal (5)(h) as follows:
26	25.5-1-204. Advisory committee to oversee the all-payer health
27	claims database - legislative declaration - creation - members - duties

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- creation of all-payer health claims database - rules. (4) The administrator shall seek funding for the creation of the all-payer health claims database and develop a plan for the financial stability of the database. On or before March 1, 2011, the administrator shall report to the governor and the general assembly on the status of the funding effort and on the status of the recommendations of the advisory committee. The report shall include the final data elements recommended by the advisory committee, the final provisions contemplated to comply with the "Health Insurance Portability and Accountability Act of 1996", Pub.L. 104-191, as amended, and any other final recommendations that are ready at the time of the report. If sufficient funding is received through gifts, grants, and donations on or before January 1, 2012, as determined by the executive director, the administrator shall, in consultation with the advisory committee, create the Colorado all-payer claims database. The Colorado all-payer claims database shall be operational no later than January 1, 2013.

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- (5) If sufficient funding is received, the executive director shall direct the administrator to create the database and the administrator shall:
- (h) Report to the governor and the general assembly on or before March 1 of each year on the status of implementing the database and any recommendations for statutory or regulatory changes, with input from the advisory committee or its successor governance entity, that would advance the purposes of this section;
- SECTION 5. In Colorado Revised Statutes, 25.5-1-206, amend
 (6) as follows:
 - 25.5-1-206. School-based substance abuse prevention and intervention program creation reporting legislative declaration

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- definitions - repeal. (6) (a) On or before November 1 in any fiscal year in which the state department awards grants pursuant to this section, the state department shall submit a report to the joint budget committee; the public health care and human services and the health, insurance, and environment committees of the house of representatives, or any successor committees; and the health and human services committee of the senate, or any successor committee, summarizing all grants awarded pursuant to the grant program. At a minimum, the report must include the grant recipient and the amount of the grant, a description of the program or strategies delivered by the grant recipient, the outcomes achieved or proposed to be achieved by the program or strategies, and any other information relating to the success of the grant program in reducing or preventing the use of marijuana and alcohol and the misuse of prescription drugs by youth who are twelve to nineteen years of age.

(b) PURSUANT TO SECTION 24-1-136 (11)(a)(I), THIS SUBSECTION(6) IS REPEALED, EFFECTIVE NOVEMBER 2, 2017.

SECTION 6. In Colorado Revised Statutes, **amend** 25.5-3-107 as follows:

NOTWITHSTANDING THE PROVISIONS OF SECTION 24-1-136 (11)(a)(I), the executive director shall prepare an annual report concerning the status of the medically indigent program to be submitted to the health and human services committees of the senate and the house of representatives, or any successor committees, no later than February 1 of each year. The report shall be prepared following consultation with providers in the program, state department personnel, and other agencies, organizations, or individuals as the executive director deems appropriate in order to obtain

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1	comprehensive and objective information about the program.
2	SECTION 7. In Colorado Revised Statutes, 25.5-3-405, amend
3	(2) as follows:
4	25.5-3-405. Program reporting. (2) NOTWITHSTANDING THE
5	PROVISIONS OF SECTION 24-1-136 (11)(a)(I), on or before November 1,
6	2016, and each November 1 thereafter, the state department shall submit
7	a report to the joint budget committee of the general assembly and to the
8	health and human services committee of the senate and the public health
9	care and human services committee of the house of representatives, or
10	any successor committees, on the operation and effectiveness of the
11	program, including an itemization of the department's administrative
12	expenditures in implementing and administering the program and any
13	recommendations for legislative changes to the program.
14	SECTION 8. In Colorado Revised Statutes, 25.5-4-211, amend
15	(3) as follows:
16	25.5-4-211. Medicaid management information system -
17	appropriation in annual general appropriation act - expenditure in
18	next fiscal year - repeal. (3) (a) On or before January 2, 2015, and on
19	or before January 2 of each year thereafter, the state department shall
20	report to the joint budget committee the amount of the appropriation from
21	the prior fiscal year that remains available for the current fiscal year and
22	the purpose for which the money are being used.
23	(b) Pursuant to Section 24-1-136 (11)(a)(I), this subsection
24	(3) IS REPEALED, EFFECTIVE JANUARY 3, 2018.
25	SECTION 9. In Colorado Revised Statutes, 25.5-4-401.5, amend
26	(2)(a) and (2)(d) as follows:
27	25.5-4-401.5. Review of provider rates - advisory committee

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- recommendations - repeal. (2) (a) In the first phase of the review process, the state department shall conduct an analysis of the access, service, quality, and utilization of each service subject to a provider rate review. The state department shall compare the rates paid with available benchmarks, including medicare rates and usual and customary rates paid by private pay parties, and use qualitative tools to assess whether payments are sufficient to allow for provider retention and client access and to support appropriate reimbursement of high-value services. 9 NOTWITHSTANDING THE PROVISIONS OF SECTION 24-1-136 (11)(a)(I), on or before May 1, 2016, and each May 1 thereafter, the state department shall provide a report on the analysis required by this paragraph (a) to the advisory committee, the joint budget committee, and any stakeholder groups identified by the state department whose rates are reviewed. (d) Notwithstanding the provisions of Section 24-1-136 (11)(a)(I), on or before November 1, 2016, and each November 1 thereafter, the state department shall submit a written report to the joint 17 budget committee and the advisory committee containing its recommendations on all of the provider rates reviewed pursuant to this section and all of the data relied upon by the state department in making its recommendations. The joint budget committee shall consider the recommendations in formulating the budget for the state department. **SECTION 10.** In Colorado Revised Statutes, 25.5-10-207.5, 23 amend (2) and (3)(a) as follows: 25.5-10-207.5. Strategic plan for services and supports - joint

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hearing - reporting - legislative declaration. (2) During each regular session of the general assembly, the joint budget committee and the health and human services committees of the senate and the house of

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representatives, or any successor committees, shall hold a joint hearing and take public testimony on the status of the waiting lists for persons with intellectual and developmental disabilities who are waiting for enrollment into a home- and community-based services program or a program provided pursuant to this article ARTICLE 10 and the availability of general fund money to reduce the number of persons on the waiting lists and the amount of time eligible persons wait for such services. NOTWITHSTANDING THE PROVISIONS OF SECTION 24-1-136 (11)(a)(I), the state department shall present testimony, including the information provided in the report pursuant to subsection (3) of this section, as well as information concerning the ongoing implementation of the strategic plan required pursuant to subsection (4) of this section, including any revisions to the strategic plan. Additionally, the state department, community-centered boards, and providers shall report on the use and effectiveness of any money appropriated in the preceding state fiscal year for increasing system capacity. The goal of the hearing is to propose an appropriation from the general fund to the intellectual and developmental disabilities services cash fund.

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(3) (a) NOTWITHSTANDING THE PROVISIONS OF SECTION 24-1-136 (11)(a)(I), on or before November 1, 2014, and November 1 of each year thereafter, in accordance with section 24-1-136 (9), C.R.S., the state department shall report to the general assembly the total number of persons with intellectual and developmental disabilities who are waiting at the time of the report for enrollment into a home- and community-based services program or a program provided pursuant to this article ARTICLE 10. The report must also include information concerning the ongoing implementation of the strategic plan required

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1	pursuant to subsection (4) of this section, including any revisions to the
2	strategic plan.
3	SECTION 11. Effective date. (1) Except as otherwise provided
4	in this section, this act takes effect upon passage.
5	(2) Section 10 of this act takes effect November 2, 2017.
6	SECTION 12. Safety clause. The general assembly hereby finds,
7	determines, and declares that this act is necessary for the immediate
8	preservation of the public peace, health, and safety.

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