A BILL FOR AN ACT

CONCERNING PAYMENT ISSUES RELATED TO SUBSTANCE USE DISORDERS.

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/.)

**Opioid and Other Substance Use Disorders Interim Study Committee.** The bill requires all individual and group health benefit plans to provide coverage without prior authorization for a five-day supply of buprenorphine for a first request within a 12-month period.

Additionally, all individual and group health benefit plans that cover physical therapy, acupuncture, or chiropractic services shall not
subject those services to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable than those applicable to primary care services under the plan if the covered person has a diagnosis of chronic pain and has or has had a substance use disorder diagnosis.

The bill prohibits carriers from taking adverse action against a provider or from providing financial incentives or disincentives to a provider based solely on a patient satisfaction survey relating to the patient's satisfaction with pain treatment.

The bill clarifies that an "urgent prior authorization request" to a carrier includes a request for authorization of medication-assisted treatment for substance use disorders.

The bill permits a pharmacist who has entered into a collaborative pharmacy practice agreement with one or more physicians to administer injectable medication-assisted treatment for substance use disorders and receive an enhanced dispensing fee for the administration.

The bill prohibits carriers from requiring a covered person to undergo step therapy using a prescription drug or drugs that include an opioid before covering a non-opioid prescription drug recommended by the covered person's provider.

The bill requires the Colorado medical assistance program to authorize reimbursement for a ready-to-use version of intranasal naloxone hydrochloride without prior authorization.

The bill prohibits the requirement that a recipient of medical assistance undergo a step-therapy protocol using a prescription drug containing an opioid prior to authorizing reimbursement for a non-opioid prescription drug recommended by the person's health care provider.

The bill permits a pharmacist who has entered into a collaborative pharmacy practice agreement with one or more physicians to administer injectable medication-assisted treatment for substance use disorders and receive an enhanced dispensing fee under the Colorado medical assistance program for the administration.

The bill requires the department of health care policy and financing and the office of behavioral health in the department of human services to establish rules that standardize utilization management authority timelines for the non-pharmaceutical components of medication-assisted treatment for substance use disorders.

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

SECTION 1. In Colorado Revised Statutes, 10-16-104, amend (5.5)(a)(III); and add (23) as follows:

10-16-104. Mandatory coverage provisions - definitions -
Behavioral, mental health, and substance use disorders rules. (5.5) EXCEPT AS PROVIDED IN SUBSECTION (5.5)(a)(III)(B) OF THIS SECTION, any preauthorization or utilization review mechanism used in the determination to provide the coverage required by this paragraph (a) must be the same as, or no more restrictive than, that used in the determination to provide coverage for a physical illness. The commissioner shall adopt rules as necessary to implement and administer this subsection (5.5).

(B) A HEALTH BENEFIT PLAN SUBJECT TO THIS SUBSECTION (5.5) MUST PROVIDE COVERAGE WITHOUT PRIOR AUTHORIZATION FOR A FIVE-DAY SUPPLY OF BUPRENORPHINE; EXCEPT THAT THIS REQUIREMENT IS LIMITED TO A FIRST REQUEST FOR BUPRENORPHINE IN A TWELVE-MONTH PERIOD.

(23) Treatment for pain. (a) ALL INDIVIDUAL AND GROUP HEALTH BENEFIT PLANS THAT PROVIDE A BENEFIT FOR PHYSICAL THERAPY, ACUPUNCTURE, OR CHIROPRACTIC CARE SHALL NOT SUBJECT THOSE SERVICES TO DOLLAR LIMITS, DEDUCTIBLES, COPAYMENTS, OR COINSURANCE PROVISIONS THAT ARE LESS FAVORABLE TO THE COVERED PERSON THAN THE DOLLAR LIMITS, DEDUCTIBLES, COPAYMENTS, OR COINSURANCE PROVISIONS THAT APPLY TO PRIMARY CARE SERVICES IF THE PHYSICAL THERAPY, ACUPUNCTURE, OR CHIROPRACTIC CARE SERVICES ARE AUTHORIZED FOR TREATMENT OF A COVERED PERSON WHO IS DIAGNOSED WITH CHRONIC PAIN AND WHO HAS OR HAS HAD A SUBSTANCE USE DISORDER DIAGNOSIS.

(b) THIS SUBSECTION (23) DOES NOT APPLY TO SUPPLEMENTAL POLICIES COVERING A SPECIFIC DISEASE OR OTHER LIMITED BENEFIT.

SECTION 2. In Colorado Revised Statutes, 10-16-121, add
(1)(e) as follows:

10-16-121. Required contract provisions in contracts between carriers and providers - definitions. (1) A contract between a carrier and a provider or its representative concerning the delivery, provision, payment, or offering of care or services covered by a managed care plan must make provisions for the following requirements:

(e) THE CONTRACT MUST CONTAIN A PROVISION THAT STATES THE CARRIER SHALL NOT TAKE AN ADVERSE ACTION AGAINST A PROVIDER OR PROVIDE FINANCIAL INCENTIVES OR SUBJECT THE PROVIDER TO FINANCIAL DIS INCENTIVES BASED SOLELY ON A PATIENT SATISFACTION SURVEY OR OTHER METHOD OF OBTAINING PATIENT FEEDBACK RELATING TO THE PATIENT'S SATISFACTION WITH PAIN TREATMENT.

SECTION 3. In Colorado Revised Statutes, 10-16-124.5, amend (8)(b) as follows:

10-16-124.5. Prior authorization form - drug benefits - rules of commissioner - definitions. (8) As used in this section:

(b) "Urgent prior authorization request" means:

(I) A request for prior authorization of a drug benefit that, based on the reasonable opinion of the prescribing provider with knowledge of the covered person's medical condition, if determined in the time allowed for nonurgent prior authorization requests, could:

(1) (A) Seriously jeopardize the life or health of the covered person or the ability of the covered person to regain maximum function; or

(1) (B) Subject the covered person to severe pain that cannot be adequately managed without the drug benefit that is the subject of the prior authorization request; OR
A REQUEST FOR PRIOR AUTHORIZATION FOR MEDICATION-ASSISTED TREATMENT FOR SUBSTANCE USE DISORDERS.

SECTION 4. In Colorado Revised Statutes, add 10-16-143.5 as follows:

10-16-143.5. Pharmacist reimbursement - substance use disorder - injections. If a pharmacist has entered into a collaborative pharmacy practice agreement with one or more physicians pursuant to section 12-42.5-602 to administer injection medication for medication-assisted treatment for substance use disorders, the pharmacist administering the drug shall receive an enhanced dispensing fee that aligns with the administration fee paid to a provider in a clinical setting.

SECTION 5. In Colorado Revised Statutes, 10-16-145, add (5) as follows:

10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription drugs containing an opioid before the carrier provides coverage for a non-opioid prescription drug recommended by the covered person's provider for the covered person's treatment.

SECTION 6. In Colorado Revised Statutes, 25.5-5-411, amend (4)(b) as follows:

25.5-5-411. Medicaid community mental health services - legislative declaration - administration - rules. (4) (b) (I) The state department shall establish cost-effective, capitated rates for community mental health services in a manner that includes cost containment...
mechanisms. These cost containment mechanisms may include, but are
not limited to, restricting average per member per month utilization
growth, restricting unit cost growth, limiting allowable administrative
cost, establishing minimum medical loss ratios, or establishing other cost
containment mechanisms that the state department determines
appropriate.

(II) The state department and the office of behavioral
health in the department of human services, in collaboration
with community mental health services providers, shall
establish rules that standardize utilization management
authority timelines for the non-pharmaceutical components of
medication-assisted treatment for substance use disorders.

SECTION 7. In Colorado Revised Statutes, add 25.5-5-509 as
follows:

25.5-5-509. Substance use disorder - prescription drugs - step
therapy prohibited - definition. (1) Notwithstanding any
provisions of this part 5 to the contrary, for the treatment of a
substance use disorder, in promulgating rules, and subject to
any necessary federal authorization, the state board:

(a) Shall authorize reimbursement for a federal drug
administration-approved ready-to-use intranasal form of
naloxone hydrochloride without prior authorization; and

(b) Shall not require a medical assistance recipient to
undergo a step-therapy protocol using a prescription drug or
sequence of prescription drugs containing an opioid before
authorizing reimbursement for a non-opioid prescription drug
recommended by the medical assistance recipient's health care
SECTION 8. In Colorado Revised Statutes, add 25.5-5-510 as follows:

25.5-5-510. Pharmacist reimbursement - substance use disorder - injections. If a pharmacist has entered into a collaborative pharmacy practice agreement with one or more physicians pursuant to section 12-42.5-602 to administer injection medication for medication-assisted treatment for substance use disorders, the pharmacist administering the drug shall receive an enhanced dispensing fee that aligns with the administration fee paid to a provider in a clinical setting.

SECTION 9. Act subject to petition - effective date. This act takes effect January 1, 2019; except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within the ninety-day period after final adjournment of the general assembly, then the act, item, section, or part will not take effect unless approved by the people at the general election to be held in November 2018 and, in such case, will take effect on January 1, 2019, or on the date of the official declaration of the vote thereon by the governor, whichever is later.