

## CHAPTER 346

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**HEALTH CARE POLICY AND FINANCING**


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**HOUSE BILL 18-1321**

BY REPRESENTATIVE(S) McKean and Arndt, Ginal, Hooton, Kennedy, Lee, Michaelson Jenet, Rosenthal, Winter, Young;  
also SENATOR(S) Moreno and Martinez Humenik, Kefalas, Court, Tate, Zenzinger.

**AN ACT**

**CONCERNING EFFICIENT ADMINISTRATION OF NONEMERGENCY MEDICAL TRANSPORTATION WITHIN THE EXISTING BENEFIT UNDER THE MEDICAL ASSISTANCE PROGRAM, AND, IN CONNECTION THEREWITH, MAKING AND REDUCING AN APPROPRIATION.**

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

**SECTION 1.** In Colorado Revised Statutes, **add 25.5-5-324** as follows:

**25.5-5-324. Nonemergency medical transportation - urgent transportation need - report - repeal.** (1) ON OR BEFORE JANUARY 1, 2019, THE STATE DEPARTMENT SHALL CREATE AND IMPLEMENT AN EFFICIENT AND COST-EFFECTIVE METHOD FOR MEETING URGENT TRANSPORTATION NEEDS WITHIN THE EXISTING NONEMERGENCY MEDICAL TRANSPORTATION BENEFIT UNDER THE MEDICAL ASSISTANCE PROGRAM. URGENT TRANSPORTATION NEEDS INCLUDE DISCHARGE FROM INPATIENT, EMERGENCY SERVICES, AND OTHER URGENT BUT NONEMERGENCY SERVICES, AS DETERMINED BY THE STATE DEPARTMENT.

(2) THE METHOD CREATED BY THE STATE DEPARTMENT MUST INCLUDE, AT A MINIMUM:

(a) MEDICAL SERVICE PROVIDER OR FACILITY ACCESS TO APPROVED TRANSPORTATION PROVIDERS FOR PATIENTS WITH URGENT TRANSPORTATION NEEDS;

(b) ACCESS TO TRANSPORTATION PROVIDERS WHO HAVE OBTAINED THE NECESSARY BACKGROUND CHECKS, DRUG TESTS, TRAINING, AND VEHICLE INSPECTIONS, AS REQUIRED BY THE STATE DEPARTMENT; AND

(c) AN EFFICIENT METHOD FOR OBTAINING AND PAYING FOR TRANSPORTATION SERVICES FOR URGENT TRANSPORTATION NEEDS.

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*Capital letters or bold & italic numbers indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.*

(3) THE STATE DEPARTMENT MAY CONTRACT FOR BACKGROUND CHECKS, DRUG TESTS, TRAINING, AND VEHICLE INSPECTIONS THAT MAY BE REQUIRED PURSUANT TO SUBSECTION (2) OF THIS SECTION.

(4) (a) THE STATE DEPARTMENT SHALL ANNUALLY REPORT ON THE IMPLEMENTATION AND EFFECTIVENESS OF THE PROCESS CREATED IN THIS SECTION FOR MEETING URGENT TRANSPORTATION NEEDS WITHIN THE NONEMERGENCY MEDICAL TRANSPORTATION BENEFIT. THE STATE DEPARTMENT SHALL PRESENT THE REPORT AS PART OF ITS ANNUAL PRESENTATION TO THE HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE AND THE PUBLIC HEALTH AND HUMAN SERVICES COMMITTEE OF THE HOUSE OF REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, THAT IS HELD EACH YEAR DURING THE INTERIM PRIOR TO THE LEGISLATIVE SESSION, AS REQUIRED PURSUANT TO SECTION 2-7-203.

(b) NOTWITHSTANDING THE PROVISIONS OF SECTION 24-1-136 (11)(a)(I) TO THE CONTRARY, THE REPORT REQUIRED PURSUANT TO THIS SECTION SHALL CONTINUE UNTIL THE BEGINNING OF THE 2025 LEGISLATIVE SESSION.

(c) THIS SECTION IS REPEALED, EFFECTIVE JULY 1, 2025.

**SECTION 2. Appropriation - adjustments to 2018 long bill.** (1) For the 2018-19 state fiscal year, \$377,621 is appropriated to the department of health care policy and financing. Of this appropriation \$359,295 is from the general fund and \$18,326 is from the healthcare affordability and sustainability fee cash fund created in section 25.5-4-402.4 (5)(a), C.R.S. To implement this act, the department may use this appropriation as follows:

(a) \$25,688 for use by the executive director's office for personal services, which consists of \$16,833 from the general fund and \$8,855 from the healthcare affordability and sustainability fee cash fund, and which amount is based on an assumption that the department will require an additional 0.8 FTE;

(b) \$2,731 for use by the executive director's office for operating expenses, which consists of \$1,790 from the general fund and \$941 from the healthcare affordability and sustainability fee cash fund;

(c) \$21,750 from the general fund for medicaid management information system maintenance and projects; and

(d) \$327,452 for medical and long-term care services for medicaid eligible individuals, which consists of \$318,922 from the general fund, which amount is subject to the "(M)" notation as defined in the annual general appropriation act for the same fiscal year, and \$8,530 from the healthcare affordability and sustainability fee cash fund.

(2) For the 2018-19 state fiscal year, the general assembly anticipates that the department of health care policy and financing will receive \$436,989 in federal funds to implement this act. The appropriation in subsection (1) of this section is based on the assumption that the department will receive this amount of federal funds to be used as follows:

- (a) \$25,688 for use by the executive director's office for personal services;
- (b) \$2,732 for use by the executive director's office for operating expenses;
- (c) \$65,250 for medicaid management information system maintenance and projects; and
- (d) \$343,319 for medical and long-term care services for medicaid eligible individuals.

(3) To implement this act, appropriations made in the annual general appropriation act for the 2018-19 state fiscal year to the department of health care policy and financing are adjusted as follows:

(a) The general fund appropriation for medical and long-term care services for medicaid eligible individuals is decreased by \$359,295; and

(b) The cash funds appropriation from the healthcare affordability and sustainability fee cash fund created in section 25.5-4-402.4 (5)(a), C.R.S., for medical and long-term care services for medicaid eligible individuals is decreased by \$52,378.

(4) The decrease of the appropriations in subsection (3) of this section is based on the assumption that the anticipated amount of federal funds received for the 2018-19 state fiscal year by the department of health care policy and financing for medical and long-term care services for medicaid eligible individuals will decrease by \$507,240.

**SECTION 3. Safety clause.** The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Approved: May 30, 2018