

**Second Regular Session
Seventy-second General Assembly
STATE OF COLORADO**

PREAMENDED

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

LLS NO. 20-0112.01 Christy Chase x2008

HOUSE BILL 20-1086

HOUSE SPONSORSHIP

Michaelson Jenet and Larson, Arndt, Becker, Benavidez, Bird, Buentello, Caraveo, Coleman, Cutter, Esgar, Exum, Froelich, Gonzales-Gutierrez, Gray, Herod, Hooton, Jackson, Jaquez Lewis, Kennedy, Kipp, McCluskie, Melton, Mullica, Roberts, Singer, Sirota, Snyder, Sullivan, Tipper, Titone, Valdez A., Valdez D., Weissman, Woodrow, Young

SENATE SPONSORSHIP

Fields,

House Committees

Health & Insurance
Appropriations

Senate Committees

Health & Human Services
Appropriations

A BILL FOR AN ACT

101 **CONCERNING HEALTH INSURANCE COVERAGE FOR AN ANNUAL MENTAL**
102 **HEALTH WELLNESS EXAMINATION PERFORMED BY A QUALIFIED**
103 **MENTAL HEALTH CARE PROVIDER, AND, IN CONNECTION**
104 **THEREWITH, MAKING AN APPROPRIATION.**

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>.)

The bill adds a requirement, as part of mandatory health insurance coverage of preventive health care services, that health plans cover an annual mental health wellness examination of up to 60 minutes that is

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
*Capital letters or bold & italic numbers indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.*

HOUSE
3rd Reading Unamended
February 20, 2020

HOUSE
Amended 2nd Reading
February 19, 2020

- performed by a qualified mental health care provider. The coverage must:
- ! Be comparable to the coverage of a physical examination;
 - ! Comply with the requirements of federal mental health parity laws; and
 - ! Not require any deductibles, copayments, or coinsurance for the mental health wellness examination.
-

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

2 **SECTION 1. Legislative declaration.** (1) The general assembly
3 finds and determines that:

4 (a) Prevention and early identification of mental health issues can
5 lead to better outcomes for families and all people throughout their lives;

6 (b) Mental health conditions that occur in youth before the age of
7 six can interfere with emotional, cognitive, and physical development;

8 (c) The number of aging adults who have a mental health
9 condition is expected to double to fifteen million in the next two decades,
10 leading to increased health care use and higher health care costs;

11 (d) With an increase in suicide and the number of overdose deaths
12 on the rise, it is imperative for Colorado to increase access to preventive
13 annual mental health wellness examinations;

14 (e) Annual mental health wellness examinations help identify
15 potential mental health issues early on and allow individuals to be offered
16 services and supports to address their needs before an issue progresses or
17 becomes a crisis;

18 (f) Primary care providers are important in early detection of
19 mental health issues but often lack the ability to provide adequate
20 education, consultation, and treatment options to clients in need of further
21 mental health support; and

22 (g) Therefore, it is imperative that our system works to integrate

1 and colocate mental health services in primary care settings and opens
2 access to annual mental health wellness exams for all Coloradans, starting
3 at the prenatal phase through the end of life.

4 **SECTION 2.** In Colorado Revised Statutes, 10-16-104, **amend**
5 (18)(a)(I) introductory portion; and **add** (18)(b.7), (18)(c)(III.7), and
6 (18)(c)(III.9) as follows:

7 **10-16-104. Mandatory coverage provisions - definitions -**
8 **rules. (18) Preventive health care services.** (a) (I) The following
9 policies and contracts that are ~~delivered~~, issued OR renewed ~~or reinstated~~
10 ~~on or after January 1, 2010~~, IN THIS STATE must provide coverage for the
11 total cost of the preventive health care services specified in ~~paragraph (b)~~
12 ~~of this subsection (18)~~ SUBSECTIONS (18)(b) AND (18)(b.7) OF THIS
13 SECTION:

14 (b.7) (I) SUBJECT TO SUBSECTION (18)(b.7)(III) OF THIS SECTION,
15 THE COVERAGE REQUIRED BY THIS SUBSECTION (18) MUST INCLUDE AN
16 ANNUAL MENTAL HEALTH WELLNESS EXAMINATION OF UP TO SIXTY
17 MINUTES THAT IS PERFORMED BY A QUALIFIED MENTAL HEALTH CARE
18 PROVIDER. THE COVERAGE FOR AN ANNUAL MENTAL HEALTH WELLNESS
19 EXAMINATION MUST BE NO LESS EXTENSIVE THAN THE COVERAGE
20 PROVIDED FOR A PHYSICAL EXAMINATION AND MUST COMPLY WITH THE
21 REQUIREMENTS OF THE MHPAEA.

22 (II) WITHIN ONE HUNDRED TWENTY DAYS AFTER THE EFFECTIVE
23 DATE OF THIS SUBSECTION (18)(b.7), THE DIVISION SHALL SUBMIT TO THE
24 FEDERAL DEPARTMENT OF HEALTH AND HUMAN SERVICES ITS
25 DETERMINATION AS TO WHETHER THE COVERAGE SPECIFIED IN THIS
26 SUBSECTION (18)(b.7) IS IN ADDITION TO ESSENTIAL HEALTH BENEFITS
27 AND WOULD BE SUBJECT TO DEFRAIAL BY THE STATE PURSUANT TO 42

1 U.S.C. SEC. 18031 (d)(3)(B) AND A REQUEST THAT THE FEDERAL
2 DEPARTMENT CONFIRM THE DIVISION'S DETERMINATION WITHIN SIXTY
3 DAYS AFTER RECEIPT OF THE DIVISION'S REQUEST AND SUBMISSION OF ITS
4 DETERMINATION.

5 (III) THIS SUBSECTION (18)(b.7) APPLIES TO POLICIES OR
6 CONTRACTS ISSUED OR RENEWED IN THIS STATE THAT ARE SUBJECT TO
7 THIS SUBSECTION (18), AND THE DIVISION SHALL IMPLEMENT THE
8 REQUIREMENTS OF THIS SUBSECTION (18)(b.7), IF:

9 (A) THE DIVISION RECEIVES CONFIRMATION FROM THE FEDERAL
10 DEPARTMENT OF HEALTH AND HUMAN SERVICES THAT THE COVERAGE
11 SPECIFIED IN THIS SUBSECTION (18)(b.7) DOES NOT CONSTITUTE AN
12 ADDITIONAL BENEFIT THAT REQUIRES DEFAYAL BY THE STATE PURSUANT
13 TO 42 U.S.C. SEC. 18031 (d)(3)(B); OR

14 (B) MORE THAN THREE HUNDRED SIXTY-FIVE DAYS HAVE PASSED
15 SINCE THE DIVISION SUBMITTED ITS DETERMINATION AND REQUEST FOR
16 CONFIRMATION THAT THE COVERAGE SPECIFIED IN THIS SUBSECTION
17 (18)(b.7) IS NOT AN ADDITIONAL BENEFIT THAT REQUIRES STATE
18 DEFAYAL PURSUANT TO 42 U.S.C. SEC. 18031 (d)(3)(B), AND THE
19 FEDERAL DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS FAILED TO
20 RESPOND TO THE REQUEST WITHIN THAT PERIOD, IN WHICH CASE THE
21 DIVISION SHALL CONSIDER THE FEDERAL DEPARTMENT'S UNREASONABLE
22 DELAY A PRECLUSION FROM REQUIRING DEFAYAL BY THE STATE.

23 (c) For purposes of this subsection (18):

24 (III.7) "MENTAL HEALTH WELLNESS EXAMINATION" MEANS AN
25 EXAMINATION THAT INCLUDES SERVICES SUCH AS A BEHAVIORAL HEALTH
26 SCREENING; EDUCATION AND CONSULTATION ON HEALTHY LIFESTYLE
27 CHANGES; REFERRALS TO ONGOING TREATMENT, MENTAL HEALTH

1 SERVICES, AND OTHER SUPPORTS; AND DISCUSSION OF POTENTIAL OPTIONS
2 FOR MEDICATION.

3 (III.9) "QUALIFIED MENTAL HEALTH CARE PROVIDER" MEANS:

4 (A) A PHYSICIAN LICENSED TO PRACTICE MEDICINE PURSUANT TO
5 ARTICLE 240 OF TITLE 12 WHO HAS SPECIFIC BOARD CERTIFICATION OR
6 TRAINING IN PSYCHIATRY OR OTHER MENTAL OR BEHAVIORAL HEALTH
7 CARE AREAS;

8 (B) A PHYSICIAN ASSISTANT LICENSED PURSUANT TO ARTICLE 240
9 OF TITLE 12 WHO HAS TRAINING IN PSYCHIATRY OR MENTAL HEALTH;

10 (C) A PSYCHOLOGIST LICENSED PURSUANT TO PART 3 OF ARTICLE
11 245 OF TITLE 12;

12 (D) A CLINICAL SOCIAL WORKER LICENSED PURSUANT TO PART 4
13 OF ARTICLE 245 OF TITLE 12;

14 (E) A MARRIAGE AND FAMILY THERAPIST LICENSED PURSUANT TO
15 PART 5 OF ARTICLE 245 OF TITLE 12;

16 (F) A PROFESSIONAL COUNSELOR LICENSED PURSUANT TO PART 6
17 OF ARTICLE 245 OF TITLE 12;

18 (G) AN ADDICTION COUNSELOR LICENSED PURSUANT TO PART
19 8 OF ARTICLE 245 OF TITLE 12; OR

20 (H) AN ADVANCED PRACTICE NURSE, AS DEFINED IN SECTION
21 12-255-104 (1), WITH SPECIFIC TRAINING IN PSYCHIATRIC NURSING.

22 **SECTION 3. Appropriation.** For the 2020-21 state fiscal year,
23 \$13,347 is appropriated to the department of regulatory agencies for use
24 by the division of insurance. This appropriation is from the division of
25 insurance cash fund created in section 10-1-103 (3), C.R.S., and is based
26 on an assumption that the division will require an additional 0.2 FTE. To
27 implement this act, the division may use this appropriation for personal

1 services.

2 **SECTION 4. Act subject to petition - effective date -**
3 **applicability.** (1) This act takes effect at 12:01 a.m. on the day following
4 the expiration of the ninety-day period after final adjournment of the
5 general assembly (August 5, 2020, if adjournment sine die is on May 6,
6 2020); except that, if a referendum petition is filed pursuant to section 1
7 (3) of article V of the state constitution against this act or an item, section,
8 or part of this act within such period, then the act, item, section, or part
9 will not take effect unless approved by the people at the general election
10 to be held in November 2020 and, in such case, will take effect on the
11 date of the official declaration of the vote thereon by the governor.
12 (2) This act applies to policies and contracts issued or renewed on
13 or after January 1, 2022.