# First Regular Session Seventy-fourth General Assembly STATE OF COLORADO

## **PREAMENDED**

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

LLS NO. 23-0532.03 Brita Darling x2241

**SENATE BILL 23-189** 

#### SENATE SPONSORSHIP

**Moreno and Cutter,** Gonzales, Jaquez Lewis, Marchman, Winter F., Buckner, Coleman, Danielson, Fenberg, Fields, Ginal, Hinrichsen, Mullica, Sullivan

#### **HOUSE SPONSORSHIP**

Michaelson Jenet and Garcia, Epps, Froelich, McCormick, Titone

### **Senate Committees**

Health & Human Services Appropriations

#### **House Committees**

Health & Insurance Appropriations

### A BILL FOR AN ACT

101	CONCERNING INCREASING ACCESS TO REPRODUCTIVE HEALTH-CARE
102	SERVICES, AND, IN CONNECTION THEREWITH, MAKING AN
103	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 <a href="http://leg.colorado.gov">http://leg.colorado.gov</a>.)

**Sections 1, 2, 3, and 5** of the bill change the defined term "HIV infection prevention drug", as it appears and is used in several areas of law, to "HIV prevention drug".

### Section 2 also:

• Adds the women's preventive services guidelines of the

SENATE Amended 3rd Reading March 22, 2023

SENATE Amended 2nd Reading March 21, 2023

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

Capital letters or bold & italic numbers indicate new material to be added to existing law.

Dashes through the words or numbers indicate deletions from existing law.

health resources and services administration in the United States department of health and human services to the mandatory preventive health-care services coverage for health benefit plans;

- Specifies that the mandatory preventive health-care services benefit for counseling for, prevention of, and screening for sexually transmitted infection includes HIV prevention drugs and the services necessary for initiation and continued use of an HIV prevention drug, as described in the bill, based on the most recent guidelines and clinical guidance;
- Requires large employer plans, on and after January 1, 2025, to provide coverage for the total cost of abortion care without policy deductibles, copayments, or coinsurance. Individual and small group plans must provide this coverage if the federal department of health and human services confirms the state's determination that the coverage is not subject to state defrayal pursuant to federal law. To the extent required by binding federal jurisprudence, employers are exempted from providing coverage if providing coverage conflicts with the employer's sincerely held religious beliefs.

**Section 3** also prohibits a health insurance carrier from requiring a covered person to undergo step therapy or to receive prior authorization before a health-care provider may prescribe or dispense a medication for the treatment of HIV.

**Section 4** prohibits a carrier from imposing deductibles, copayments, coinsurance, annual or lifetime maximum benefits, or other cost sharing on coverage for:

- The treatment of a sexually transmitted infection; or
- Sterilization services, which coverage must be provided regardless of the covered person's gender.

With the minor's consent, **section 6** allows a health-care provider acting within the scope of the health-care provider's license, certificate, or registration to furnish contraceptive procedures, supplies, or information to the minor without notification to or the consent of the minor's parent or parents, legal guardian, or any other person having custody of or decision-making responsibility for the minor.

Sections 7 and 8 expand the reproductive health-care program administered by the department of health care policy and financing (department) to include additional family planning services and family-planning-related services and allow individuals under 19 years of age to apply for and enroll themselves in the program.

Section 9 requires the department to reimburse licensed health-care providers for family planning services and

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family-planning-related services provided to a minor and creates a cash fund from which the general assembly may appropriate money to the department for this purpose. **Section 10** exempts the cash fund from the limit on uncommitted cash fund reserves.

**Section 11** requires nonemergency medical transportation services under the state medical assistance program to include expenses for transportation to medical services that are prohibited from coverage pursuant to section 50 of article V of the Colorado constitution.

**Section 12** of the bill prohibits the use under the state medical assistance program of utilization management, including prior authorization and step therapy, for prescription drugs prescribed for the treatment or prevention of HIV.

1 Be it enacted by the General Assembly of the State of Colorado: SECTION 1. In Colorado Revised Statutes, 10-16-102, amend 2 3 (38.5) as follows: 4 10-16-102. **Definitions.** As used in this article 16, unless the 5 context otherwise requires: 6 "HIV infection prevention drug" means preexposure 7 prophylaxis, post-exposure prophylaxis, or other drugs approved by the 8 FDA for the prevention of HIV infection. 9 **SECTION 2.** In Colorado Revised Statutes, 10-16-104, amend 10 (18)(a)(I) introductory portion, (18)(b)(X), and (18)(e)(I); and add 11 (18)(b.3) and (26) as follows: 12 10-16-104. Mandatory coverage provisions - definitions -13 rules. (18) Preventive health-care services. (a) (I) The following 14 policies and contracts that are issued or renewed in this state must provide 15 coverage for the total cost of the preventive health-care services specified 16 in subsections (18)(b), (18)(b.3), and (18)(b.7) of this section: 17 (b) The coverage required by this subsection (18) must include 18 preventive health-care services for the following, in accordance with the

A or B recommendations of the task force for the particular preventive

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1	health-care service:
2	(X) (A) Any other preventive services included in the A or B
3	recommendation of the task force or required by federal law; ANY OTHER
4	RECOMMENDATIONS ESTABLISHED BY THE ACIP; ANY OTHER PREVENTIVE
5	CARE AND SCREENING AS PROVIDED FOR IN THE COMPREHENSIVE
6	GUIDELINES SUPPORTED BY THE HEALTH RESOURCES AND SERVICES
7	ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF HEALTH AND
8	HUMAN SERVICES FOR WOMEN; AND EVIDENCE-INFORMED PREVENTIVE
9	CARE AND SCREENING PROVIDED FOR IN THE COMPREHENSIVE GUIDELINES
10	SUPPORTED BY THE HEALTH RESOURCES AND SERVICES ADMINISTRATION
11	OF THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES
12	FOR INFANTS, CHILDREN, AND ADOLESCENTS.
13	(B) This subparagraph (X) SUBSECTION (18)(b)(X) does not apply
14	to grandfathered health benefit plans.
15	(b.3) IF COUNSELING, PREVENTION, AND SCREENING FOR A
16	SEXUALLY TRANSMITTED INFECTION, AS REQUIRED IN SUBSECTION
17	(18)(b)(XI) OF THIS SECTION, ARE COVERED SERVICES, THE HEALTH
18	BENEFIT PLAN MUST PROVIDE THE COVERAGE WITHOUT COST SHARING,
19	REGARDLESS OF THE COVERED PERSON'S GENDER, AND THE COVERAGE
20	MUST INCLUDE, CONSISTENT WITH TASK FORCE REQUIREMENTS, COVERAGE
21	FOR HIV PREVENTION DRUGS AND SERVICES NECESSARY FOR INITIATION
22	AND CONTINUED USE OF HIV PREVENTION DRUGS, INCLUDING OFFICE
23	VISITS, TESTING, VACCINATIONS, AND MONITORING SERVICES.
24	(e) (I) A carrier shall reimburse a pharmacist employed by an
25	in-network pharmacy for prescribing and dispensing HIV infection
26	prevention drugs to a covered person. A carrier shall provide a pharmacist
27	who prescribes and dispenses HIV infection prevention drugs to a

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1	covered person pursuant to section 12-280-125.7 an adequate consultative
2	fee, or, if medical billing is not available, an enhanced dispensing fee,
3	that is equivalent or that is provided to a physician or advanced practice
4	registered nurse.
5	(26) Abortion care - rules - definition. (a) EXCEPT AS PROVIDED
6	IN <u>Subsections (26)(d) and (26)(g)</u> of this section and subject to
7	THE PROVISIONS OF SUBSECTIONS (26)(e) AND (26)(f) OF THIS SECTION,
8	ALL INDIVIDUAL AND SMALL GROUP HEALTH BENEFIT PLANS ISSUED OR
9	RENEWED IN THIS STATE SHALL PROVIDE COVERAGE FOR THE TOTAL COST
10	OF ABORTION CARE.
11	(b) The coverage required pursuant to this subsection $(26)$
12	IS NOT SUBJECT TO POLICY DEDUCTIBLES, COPAYMENTS, OR COINSURANCE;
13	EXCEPT THAT COPAYMENTS MAY APPLY AS REQUIRED BY A
14	GRANDFATHERED HEALTH BENEFIT PLAN.
15	(c) THE COMMISSIONER SHALL ADOPT RULES CONSISTENT WITH
16	AND AS ARE NECESSARY TO IMPLEMENT THIS SUBSECTION (26).
17	(d) AN EMPLOYER IS NOT OBLIGATED TO PROVIDE THE COVERAGE
18	REQUIRED BY THIS SUBSECTION (26) $\underline{\text{IF:}}$
19	(I) Providing The coverage conflicts with the
20	EMPLOYER'S SINCERELY HELD RELIGIOUS BELIEFS; OR
21	(II) THE EMPLOYER IS A PUBLIC ENTITY PROHIBITED BY SECTION 50
22	OF ARTICLE V OF THE STATE CONSTITUTION FROM USING PUBLIC FUNDS TO
23	PAY FOR INDUCED ABORTIONS.
24	(e) This subsection (26) applies to, and the division shall
25	IMPLEMENT THE REQUIREMENTS OF THIS SUBSECTION (26) FOR, LARGE
26	EMPLOYER HEALTH BENEFIT PLANS ISSUED OR RENEWED IN THIS STATE ON
2.7	OR AFTER JANUARY 1, 2025.

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1	(f) WITH RESPECT TO INDIVIDUAL AND SMALL GROUP HEALTH
2	BENEFIT PLANS:
3	(I) THE DIVISION SHALL SUBMIT TO THE FEDERAL DEPARTMENT OF
4	HEALTH AND HUMAN SERVICES:
5	(A) THE DIVISION'S DETERMINATION AS TO WHETHER THE BENEFIT
6	SPECIFIED IN THIS SUBSECTION $(26)$ IS IN ADDITION TO ESSENTIAL HEALTH
7	BENEFITS AND WOULD BE SUBJECT TO DEFRAYAL BY THE STATE PURSUANT
8	TO 42 U.S.C. SEC. 18031 (d)(3)(B); AND
9	(B) A REQUEST THAT THE FEDERAL DEPARTMENT OF HEALTH AND
10	HUMAN SERVICES CONFIRM THE DIVISION'S DETERMINATION WITHIN SIXTY
11	DAYS AFTER RECEIPT OF THE DIVISION'S REQUEST FOR CONFIRMATION OF
12	THE DETERMINATION.
13	(II) This subsection (26) applies to, and the division shall
14	IMPLEMENT THE REQUIREMENTS OF THIS SUBSECTION (26) FOR,
15	INDIVIDUAL AND SMALL GROUP HEALTH BENEFIT PLANS ISSUED OR
16	RENEWED IN THIS STATE UPON THE EARLIER OF:
17	(A) TWELVE MONTHS AFTER THE FEDERAL DEPARTMENT OF
18	HEALTH AND HUMAN SERVICES CONFIRMS THAT THE COVERAGE SPECIFIED
19	IN THIS SUBSECTION $(26)$ DOES NOT CONSTITUTE AN ADDITIONAL BENEFIT
20	THAT REQUIRES DEFRAYAL BY THE STATE PURSUANT TO 42 U.S.C. SEC.
21	18031 (d)(3)(B);
22	(B) TWELVE MONTHS AFTER THE FEDERAL DEPARTMENT OF
23	HEALTH AND HUMAN SERVICES OTHERWISE INFORMS THE DIVISION THAT
24	THE COVERAGE IN THIS SUBSECTION (26) DOES NOT REQUIRE STATE
25	DEFRAYAL PURSUANT TO 42 U.S.C. SEC. 18031 (d)(3)(B); OR
26	(C) THE PASSAGE OF MORE THAN THREE HUNDRED SIXTY-FIVE
27	DAYS SINCE THE DIVISION SUBMITTED ITS DETERMINATION AND REQUEST

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1	FOR CONFIRMATION PURSUANT TO SUBSECTION (20)(1)(1) OF THIS SECTION,
2	AND THE FEDERAL DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS
3	FAILED TO RESPOND TO THE REQUEST WITHIN THAT PERIOD, IN WHICH CASE
4	THE DIVISION SHALL CONSIDER THE FEDERAL DEPARTMENT'S
5	UNREASONABLE DELAY A PRECLUSION FROM REQUIRING DEFRAYAL BY THE
6	STATE.
7	(g) The provisions of this subsection (26) do not apply to a
8	HIGH DEDUCTIBLE HEALTH BENEFIT PLAN PURSUANT TO 26 U.S.C. SEC.
9	223, AS AMENDED, ISSUED OR RENEWED IN THIS STATE UNTIL AN ELIGIBLE
10	INSURED'S DEDUCTIBLE HAS BEEN MET, UNLESS ALLOWED PURSUANT TO
11	FEDERAL LAW.
12	$(\underline{h})$ As used in this subsection (26), "abortion care" has the
13	SAME MEANING AS "ABORTION", AS DEFINED IN SECTION 25-6-402 (1).
14	SECTION 3. In Colorado Revised Statutes, amend 10-16-152 as
15	follows:
16	10-16-152. HIV prevention and treatment medication -
17	limitations on carriers - step therapy - prior <u>authorization - study -</u>
18	<u>repeal.</u> (1) A carrier shall not require a covered person to undergo step
19	therapy or to receive prior authorization before a pharmacist may,
20	pursuant to section 12-280-125.7, prescribe and OR dispense an HIV
21	infection prevention drug.
22	(2) Before July 1, 2027, a carrier shall not require a
23	COVERED PERSON TO UNDERGO STEP THERAPY OR TO RECEIVE PRIOR
24	AUTHORIZATION BEFORE A PROVIDER MAY, ACTING WITHIN THE
25	PROVIDER'S SCOPE OF PRACTICE, PRESCRIBE OR DISPENSE ANY DRUG
26	APPROVED BY THE FDA AND USED FOR THE TREATMENT OR PREVENTION
27	OF HIV THAT IS INCLUDED ON THE CARRIER'S PRESCRIPTION DRUG

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1	FORMULARY AS OF MARCH 1, 2023.
2	(3) (a) THE DIVISION SHALL CONTRACT WITH ONE OR MORE
3	ENTITIES TO CONDUCT A STUDY THAT INCLUDES QUALITATIVE PATIENT
4	AND PROVIDER EXPERIENCE INFORMATION AND AN ACTUARIAL REVIEW TO
5	CONSIDER THE PREDICTED COST AND HEALTH IMPACTS OF REMOVING THE
6	REQUIREMENT FOR A COVERED PERSON TO UNDERGO STEP THERAPY OR TO
7	RECEIVE PRIOR AUTHORIZATION BEFORE A PROVIDER MAY, ACTING WITHIN
8	THE PROVIDER'S SCOPE OF PRACTICE, PRESCRIBE OR DISPENSE A DRUG FOR
9	THE TREATMENT OF HIV. IN CONDUCTING THE STUDY, THE ENTITY
10	CONTRACTED TO PERFORM THE STUDY MUST CONSULT WITH COMMUNITY
11	ORGANIZATIONS LED BY PEOPLE LIVING WITH HIV. THE DIVISION SHALL
12	PROVIDE THE COMPLETED STUDY TO THE GENERAL ASSEMBLY NO LATER
13	<u>THAN OCTOBER 1, 2026.</u>
14	(b) This subsection (3) is repealed, effective July 1, 2027.
15	SECTION 4. In Colorado Revised Statutes, add 10-16-158 and
16	10-16-159 as follows:
17	10-16-158. Treatment of sexually transmitted infection - cost
18	sharing. (1) If the treatment of a sexually transmitted
19	INFECTION, AS DEFINED IN SECTION 25-4-402 (10), <u>IS A COVERED SERVICE</u> ,
20	THE HEALTH BENEFIT PLAN MUST PROVIDE THE COVERAGE WITHOUT
21	DEDUCTIBLES, COPAYMENTS, COINSURANCE, ANNUAL OR LIFETIME
22	MAXIMUM BENEFIT LIMITS, OR OTHER COST SHARING FOR OR LIMITS ON
23	THE COVERAGE FOR THE TREATMENT OF A SEXUALLY TRANSMITTED
24	INFECTION.
25	(2) THE PROVISIONS OF THIS SECTION DO NOT APPLY TO A HIGH
26	DEDUCTIBLE HEALTH BENEFIT PLAN PURSUANT TO 26 U.S.C. SEC. 223,
27	AS AMENDED, ISSUED OR RENEWED IN THIS STATE UNTIL AN ELIGIBLE

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1	INSURED'S DEDUCTIBLE HAS BEEN MET, UNLESS ALLOWED PURSUANT TO
2	FEDERAL LAW.
3	10-16-159. Coverage for sterilization services - cost sharing.
4	(1) If STERILIZATION SERVICES ARE A COVERED SERVICE, THE HEALTH
5	BENEFIT PLAN MUST PROVIDE THE COVERAGE REGARDLESS OF THE
6	COVERED PERSON'S SEX OR GENDER AND WITHOUT DEDUCTIBLES,
7	COPAYMENTS, COINSURANCE, ANNUAL OR LIFETIME MAXIMUM BENEFIT
8	LIMITS, OR OTHER COST SHARING FOR OR LIMITS ON THE COVERAGE FOR
9	STERILIZATION SERVICES.
10	(2) THE PROVISIONS OF THIS SECTION DO NOT APPLY TO A HIGH
11	DEDUCTIBLE HEALTH BENEFIT PLAN PURSUANT TO 26 U.S.C. SEC. 223,
12	AS AMENDED, ISSUED OR RENEWED IN THIS STATE UNTIL AN ELIGIBLE
13	INSURED'S DEDUCTIBLE HAS BEEN MET, UNLESS ALLOWED PURSUANT TO
14	FEDERAL LAW.
15	SECTION 5. In Colorado Revised Statutes, 12-280-125.7,
16	
10	amend (1) introductory portion, (1)(c), (2), (3) introductory portion,
17	<b>amend</b> (1) introductory portion, (1)(c), (2), (3) introductory portion, (5)(a), and (5)(b) as follows:
17	(5)(a), and (5)(b) as follows:
17 18	(5)(a), and (5)(b) as follows:  12-280-125.7. Pharmacists' authority to prescribe and
17 18 19	(5)(a), and (5)(b) as follows:  12-280-125.7. Pharmacists' authority to prescribe and dispense HIV prevention drugs - definitions - rules. (1) As used in this
17 18 19 20	(5)(a), and (5)(b) as follows:  12-280-125.7. Pharmacists' authority to prescribe and dispense HIV prevention drugs - definitions - rules. (1) As used in this section, UNLESS THE CONTEXT OTHERWISE REQUIRES:
17 18 19 20 21	(5)(a), and (5)(b) as follows:  12-280-125.7. Pharmacists' authority to prescribe and dispense HIV prevention drugs - definitions - rules. (1) As used in this section, UNLESS THE CONTEXT OTHERWISE REQUIRES:  (c) "HIV infection prevention drug" means preexposure
17 18 19 20 21 22	(5)(a), and (5)(b) as follows:  12-280-125.7. Pharmacists' authority to prescribe and dispense HIV prevention drugs - definitions - rules. (1) As used in this section, UNLESS THE CONTEXT OTHERWISE REQUIRES:  (c) "HIV infection prevention drug" means preexposure prophylaxis, post-exposure prophylaxis, or other drugs approved by the
17 18 19 20 21 22 23	(5)(a), and (5)(b) as follows:  12-280-125.7. Pharmacists' authority to prescribe and dispense HIV prevention drugs - definitions - rules. (1) As used in this section, UNLESS THE CONTEXT OTHERWISE REQUIRES:  (c) "HIV infection prevention drug" means preexposure prophylaxis, post-exposure prophylaxis, or other drugs approved by the FDA for the prevention of HIV infection.
17 18 19 20 21 22 23 24	(5)(a), and (5)(b) as follows:  12-280-125.7. Pharmacists' authority to prescribe and dispense HIV prevention drugs - definitions - rules. (1) As used in this section, UNLESS THE CONTEXT OTHERWISE REQUIRES:  (c) "HIV infection prevention drug" means preexposure prophylaxis, post-exposure prophylaxis, or other drugs approved by the FDA for the prevention of HIV infection.  (2) A pharmacist may prescribe and dispense HIV infection

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(3) Before prescribing or dispensing HIV infection prevention drugs to a patient, a pharmacist must:

- (5) (a) On or before six months after July 13, 2020, the state board of pharmacy, the Colorado medical board, and the state board of nursing shall, in collaboration with the department of public health and environment, and as described in section 12-280-601 (1)(b), develop statewide drug therapy protocols for pharmacists to prescribe and dispense HIV infection prevention drugs.
- (b) If the state board of pharmacy, the Colorado medical board, and the state board of nursing are not able to agree in the time period required by subsection (5)(a) of this section to statewide drug therapy protocols for pharmacists to prescribe and dispense HIV infection prevention drugs, the state board of pharmacy shall collaborate with the department of public health and environment to develop and implement statewide drug therapy protocols by January 1, 2021.

**SECTION 6.** In Colorado Revised Statutes, **amend** 13-22-105 as follows:

WITH THE MINOR'S CONSENT, A HEALTH-CARE PROVIDER LICENSED, CERTIFIED, OR REGISTERED PURSUANT TO TITLE 12 WHO IS ACTING WITHIN THE HEALTH-CARE PROVIDER'S SCOPE OF PRACTICE MAY FURNISH CONTRACEPTIVE procedures, supplies, and OR information may be furnished by physicians licensed under article 240 of title 12 to any A minor who is pregnant, or a parent, or married, or who has the consent of the minor's parent or legal guardian, or who has been referred for such services by another physician, a member of the clergy, a family planning clinic, a school or institution of higher education, or any agency or

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1	instrumentality of this state of any subdivision thereof, of who requests
2	and is in need of birth control procedures, supplies, or information
3	WITHOUT NOTIFICATION TO OR THE CONSENT OF THE MINOR'S PARENT OR
4	PARENTS, LEGAL GUARDIAN, OR ANY OTHER PERSON HAVING CUSTODY OF
5	OR DECISION-MAKING RESPONSIBILITY FOR THE MINOR.
6	SECTION 7. In Colorado Revised Statutes, 25.5-2-103, amend
7	(2), (6), and (7)(c); <b>repeal</b> (1)(a); and <b>add</b> (1)(g) and (5.5) as follows:
8	25.5-2-103. Reproductive health-care program - report - rules
9	- definitions. (1) As used in this section, unless the context otherwise
10	requires:
11	(a) "Contraceptive methods and counseling services" means:
12	(I) Any FDA-approved contraceptive drug, device, or product;
13	(II) Services related to the administration and monitoring of
14	FDA-approved contraceptive drugs, devices, and products, including
15	management of side effects;
16	(III) Counseling services for continued adherence to a prescribed
17	regimen;
18	(IV) Device insertion and removal; and
19	(V) Any other contraceptive methods and counseling services
20	identified by the health resources and services administration in the
21	United States department of health and human services or the Women's
22	Preventive Services Guidelines as of December 17, 2019.
23	(g) "Reproductive health-care services" means family
24	PLANNING SERVICES, AS DEFINED IN SECTION 25.5-4-412 (2)(b), AND
25	FAMILY-PLANNING-RELATED SERVICES, AS DEFINED IN SECTION 25.5-4-412
26	(2)(a).
27	(2) On and after July 1, 2022, the state department shall

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1	administer a reproductive health-care program, referred to in this section
2	as the "program", that provides contraceptive methods and counseling
3	REPRODUCTIVE HEALTH-CARE services to participants.
4	=
5	(5.5) To the extent practicable, the state department
6	SHALL ENSURE THAT ELIGIBLE INDIVIDUALS SEEKING TO PARTICIPATE IN
7	THE PROGRAM ARE ABLE TO APPLY FOR AND ENROLL IN THE PROGRAM
8	THROUGH THEIR LOCAL COUNTY OFFICE, A STATE MEDICAL ASSISTANCE
9	PROGRAM SITE, AN ONLINE APPLICATION, OR ANY OTHER MECHANISM THAT
10	IS AVAILABLE TO APPLICANTS FOR THE STATE MEDICAL ASSISTANCE
11	PROGRAM.
12	(6) The state department shall provide contraceptive methods and
13	counseling REPRODUCTIVE HEALTH-CARE services to participants without
14	imposing any cost-sharing requirements.
15	(7) Beginning in state fiscal year 2023-24, the state department
16	shall analyze and report the cost-effectiveness of the program to the
17	public through the annual hearing, pursuant to the "State Measurement for
18	Accountable, Responsive, and Transparent (SMART) Government Act",
19	part 2 of article 7 of title 2. At a minimum, the report must include:
20	(c) The cost of providing contraceptive methods and counseling
21	REPRODUCTIVE HEALTH-CARE services to participants;
22	SECTION 8. In Colorado Revised Statutes, 25.5-1-201, amend
23	(1) introductory portion and (1)(f.5) as follows:
24	25.5-1-201. Programs to be administered by the department
25	of health care policy and financing. (1) The department of health care
26	policy and financing STATE DEPARTMENT shall administer the following
27	programs and perform the following functions:

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1	(1.5) The reproductive health-care program that provides
2	contraceptive methods and counseling REPRODUCTIVE HEALTH-CARE
3	services, as specified in section 25.5-2-103;
4	
5	<b>SECTION 9.</b> In Colorado Revised Statutes, <b>add</b> 25.5-5-514 as
6	follows:
7	25.5-5-514. Prescription drugs used for treatment or
8	prevention of HIV - prohibition on utilization management -
9	definition. (1) As used in this section, "HIV" means human
10	IMMUNODEFICIENCY VIRUS.
11	(2) (a) Before July 1, 2027, the state department shall not
12	RESTRICT BY PRIOR AUTHORIZATION OR STEP THERAPY REQUIREMENTS
13	ANY PRESCRIPTION DRUG APPROVED BY THE FEDERAL FOOD AND DRUG
14	ADMINISTRATION THAT IS USED FOR THE TREATMENT OR PREVENTION OF
15	HIV IF A PRESCRIBING PRACTITIONER LICENSED PURSUANT TO TITLE 12
16	HAS DETERMINED THE PRESCRIPTION DRUG TO BE MEDICALLY NECESSARY
17	FOR THE TREATMENT OR PREVENTION OF HIV FOR A RECIPIENT.
18	PRESCRIPTION DRUGS USED FOR THE TREATMENT OR PREVENTION OF HIV
19	INCLUDE PROTEASE INHIBITORS, NON-NUCLEOSIDE REVERSE
20	TRANSCRIPTASE INHIBITORS, NUCLEOSIDE REVERSE TRANSCRIPTASE
21	INHIBITORS, ANTIVIRALS, INTEGRASE INHIBITORS, LONG ACTING
22	MEDICATIONS, AND FUSION INHIBITORS.
23	(b) Nothing in this subsection (2) prevents the state
24	DEPARTMENT FROM PERFORMING DRUG UTILIZATION REVIEW THAT MAY
25	BE NECESSARY FOR PATIENT SAFETY OR FOR ENSURING THE PRESCRIBED
26	USE IS FOR A MEDICALLY ACCEPTED INDICATION, AS REQUIRED BY SECTION
27	1927 OF THE "SOCIAL SECURITY ACT OF 1935"

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1	SECTION 10. In Colorado Revised Statutes, 25-6-101, amend
2	(1) as follows:
3	25-6-101. Legislative declaration. (1) Continuing population
4	growth either causes or aggravates many social, economic, and
5	environmental problems, both in this state and in the nation EVERY
6	INDIVIDUAL HAS A FUNDAMENTAL RIGHT TO MAKE DECISIONS ABOUT THE
7	INDIVIDUAL'S REPRODUCTIVE HEALTH CARE INCLUDING THE
8	FUNDAMENTAL RIGHT TO USE OR REFUSE CONTRACEPTION.
9	SECTION 11. In Colorado Revised Statutes, add 25-6-104 as
10	<u>follows:</u>
11	25-6-104. Department of public health and environment -
12	family planning access collaborative - legislative declaration -
13	recommendations - funding. (1) (a) THE GENERAL ASSEMBLY FINDS AND
14	DECLARES THAT, ACCORDING TO A 2019 REPORT BY THE COLORADO
15	DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT, REFERRED TO IN THIS
16	SECTION AS THE "DEPARTMENT", IN 2019, THERE WERE NINETY-THREE
17	THOUSAND THREE HUNDRED COLORADANS WITHOUT ACCESS TO FAMILY
18	PLANNING SERVICES, INCLUDING FIFTY-EIGHT THOUSAND COLORADANS
19	WHO WERE UNINSURED AND THIRTY-FIVE THOUSAND THREE HUNDRED
20	WHO WERE INSURED, BUT NOT USING THEIR FAMILY PLANNING COVERAGE
21	PRIMARILY DUE TO FEAR OF BREACHES IN CONFIDENTIALITY.
22	(b) The general assembly further finds that there have
23	SINCE BEEN IMPORTANT EXPANSIONS IN ACCESS INCLUDING A STATE PLAN
24	AMENDMENT TO EXPAND INCOME ELIGIBILITY FOR SERVICES, THE
25	CREATION OF COVERAGE PROGRAMS FOR UNDOCUMENTED INDIVIDUALS,
26	EXPANSIONS OF COMMERCIAL AND MEDICAID INSURANCE COVERAGE, AND
27	INCREASED FAMILY PLANNING FUNDING. HOWEVER, PERSISTENT GAPS IN

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1	ACCESS REMAIN.
2	(2) The department shall convene a family planning
3	ACCESS COLLABORATIVE TO COORDINATE WITH THE DEPARTMENT TO
4	ADVISE THE DEPARTMENT IN IDENTIFYING ACCESS GAPS THAT CONTRIBUTE
5	TO APPROXIMATELY NINETY-THREE THOUSAND COLORADANS LACKING
6	FAMILY PLANNING ACCESS INCLUDING, BUT NOT LIMITED TO:
7	(a) PRIVACY AND CONFIDENTIALITY CONCERNS;
8	(b) GAPS IN EXISTING FAMILY PLANNING PROGRAMS;
9	(c) GEOGRAPHIC BARRIERS AND RURAL ACCESS;
10	(d) ABILITY OF ADOLESCENTS TO ACCESS CARE AND SERVICES;
11	(e) FUNDING FOR SERVICES;
12	(f) IDENTIFICATION OF LEGISLATIVE, REGULATORY, AND FUNDING
13	STRATEGIES TO CLOSE ACCESS GAPS IDENTIFIED BY THE COLLABORATIVE
14	(3) The department shall invite representatives with
15	RELEVANT EXPERTISE IN THE PROVISION OF, FUNDING OF, AND ADVOCACY
16	FOR FAMILY PLANNING SERVICES TO PARTICIPATE IN THE COLLABORATIVE
17	(4) The department shall convene the family planning
18	ACCESS COLLABORATIVE ON OR BEFORE SEPTEMBER 1, 2023.
19	(5) On or before December 15, 2023, the collaborative
20	SHALL PUBLISH RECOMMENDATIONS INFORMED BY THE GAPS IDENTIFIED
21	IN SUBSECTION (2) OF THIS SECTION.
22	(6) For the 2023-24 state fiscal year, the general
23	ASSEMBLY SHALL APPROPRIATE TWO HUNDRED THOUSAND DOLLARS FROM
24	THE GENERAL FUND TO THE DEPARTMENT FOR THE PURPOSES OF THIS
25	SECTION.
26	(7) THE DEPARTMENT MAY SEEK, ACCEPT, AND EXPEND GIFTS
27	GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR THE

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1	PURPOSES OF THIS SECTION.
2	(8) This section is repealed, effective July 1, 2024.
3	SECTION 12. In Colorado Revised Statutes, 10-16-124.5.
4	amend (2)(a) introductory portion; and add (2)(c) and (2)(c.5) as follows:
5	10-16-124.5. Prior authorization form - drug benefits - rules
6	of commissioner - definitions - repeal. (2) (a) Except as provided in
7	paragraph (b) of this subsection (2) SUBSECTION (2)(b) OR (2)(c) OF THIS
8	SECTION, a prior authorization request is deemed granted if a carrier or
9	pharmacy benefit management firm fails to:
10	(c) FOR NONURGENT PRIOR AUTHORIZATION REQUESTS RELATED
11	TO A COVERED PERSON'S HIV PRESCRIPTION DRUG COVERAGE, THE PRIOR
12	AUTHORIZATION REQUEST IS DEEMED GRANTED IF A CARRIER OR
13	PHARMACY BENEFIT MANAGEMENT FIRM FAILS TO:
14	(I) Utilize the prior authorization process developed
15	PURSUANT TO SUBSECTION (3) OF THIS SECTION;
16	(II) FOR PRIOR AUTHORIZATION REQUESTS SUBMITTED
17	ELECTRONICALLY:
18	(A) NOTIFY THE PRESCRIBING PROVIDER WITHIN ONE BUSINESS
19	DAY AFTER RECEIPT OF THE REQUEST THAT THE REQUEST IS APPROVED.
20	DENIED, OR INCOMPLETE, AND IF INCOMPLETE, INDICATE THE SPECIFIC
21	ADDITIONAL INFORMATION, CONSISTENT WITH CRITERIA POSTED
22	PURSUANT TO SUBSECTION (3)(a)(II) OF THIS SECTION, THAT IS REQUIRED
23	TO PROCESS THE REQUEST; OR
24	(B) NOTIFY THE PRESCRIBING PROVIDER WITHIN ONE BUSINESS
25	DAY AFTER RECEIVING THE ADDITIONAL INFORMATION REQUIRED BY THE
26	CARRIER OR PHARMACY BENEFIT MANAGEMENT FIRM PURSUANT TO
27	SUBSECTION (2)(a)(II)(A) OF THIS SECTION, THAT THE REQUEST IS

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1	APPROVED OR DENIED; AND
2	(III) FOR NONURGENT AND URGENT PRIOR AUTHORIZATION
3	REQUESTS SUBMITTED ORALLY, BY FACSIMILE, OR BY ELECTRONIC MAIL,
4	NOTIFY THE PRESCRIBING PROVIDER WITHIN ONE DAY AFTER RECEIPT OF
5	THE REQUEST THAT THE REQUEST IS APPROVED OR DENIED.
6	(c.5) This subsection (2)(c.5) and subsection (2)(c) of this
7	SECTION ARE REPEALED, EFFECTIVE JULY 1, 2027.
8	SECTION 13. Appropriation. (1) For the 2023-24 state fiscal
9	year, \$200,000 is appropriated to the department of public health and
10	environment for use by the prevention services division. This
11	appropriation is from the general fund. To implement this act, the division
12	may use this appropriation for the family planning access collaborative
13	related to women's health.
14	(2) For the 2023-24 state fiscal year, \$67,627 is appropriated to
15	the department of regulatory agencies. This appropriation is from the
16	division of insurance cash fund created in section 10-1-103 (3), C.R.S. To
17	implement this act, the division may use this appropriation as follows:
18	(a) \$37,109 for use by the division of insurance for personal
19	services, which amount is based on an assumption that the division will
20	require an additional 0.5 FTE;
21	(b) \$7,345 for use by the division of insurance for operating
22	expenses; and
23	(c) \$23,263 for the purchase of legal services.
24	(3) For the 2023-24 state fiscal year, \$23,263 is appropriated to
25	the department of law. This appropriation is from reappropriated funds
26	received from the department of regulatory agencies under subsection
27	(2)(c) of this section and is based on an assumption that the department

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of law will require an additional 0.1 FTE. To implement this act, the
department of law may use this appropriation to provide legal services for
the department of regulatory agencies.

SECTION 14. Safety clause. The general assembly hereby finds,
determines, and declares that this act is necessary for the immediate
preservation of the public peace, health, or safety.

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