

Senate Health & Human Services

03/26/2026

HB26-1002 Provider Participation in Health Insurance

Typed Text of Testimony Submitted

| Name, Position, Representing                      | Typed Text of Testimony   |
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| <p>Beth Eldridge</p> <p>For</p> <p>themselves</p> | <p>Dear Senators,</p> <p>I am writing to support the "Provider Participation in Health Insurance" Bill. We have a mental health crisis in Colorado, as evidenced by:</p> <ul style="list-style-type: none"><li>- Colorado ranks #50 (of 50) for the Prevalence of Mental Illness</li><li>- Construction workers die by suicide nearly 2x the rate of average workers</li><li>- Suicide was the #1 cause of death for 10-18 year olds between 2015-2019</li><li>- 47 out of 64 Colorado counties don't have a single practicing child psychiatrist (Axis Integrated Mental Health, n.d.)</li></ul> <p>While we need a broad menu of solutions to resolve this crisis, this bill will help in a few key areas by:</p> <ul style="list-style-type: none"><li>- making it easier for consumers to find providers</li><li>- allowing educated, supervised prelicensed mental health professionals to be compensated by insurance for their work</li><li>- and requiring a reasonable amount of hours of supervised training, rather than higher than the national average.</li></ul> <p>As a Master's of Social Work student at Metro State, and a member of the multi-racial, multi-faith-based grassroots organization Together Colorado, I urge you to pass this bill, so we can move a few steps in the right direction to improve mental health, so we can decrease deaths by suicide, and to increase worker presenteeism and productivity.</p> <p>Furthermore, this bill will help us reach toward the goals of the Behavioral Health-care Workforce Law, SB22-181 passed in 2022. And it</p> |

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|  | <p>could help offset the harm done by HR.1 which will make it harder for thousands of people to get mental health care. I respectfully request you to pass this bill - for the well-being of all Coloradans, regardless of political party, religion, or other affiliations.</p> <p>Thank you for your consideration,</p> <p>-Beth Eldridge, PhD</p> <p>MSW Student</p> <p>Together CO Member, BoCo</p> <p>Former Affordable Housing (ECHO) Board Member</p> <p>Former Marshall Fire Recovery Navigator</p> <p>Former Teacher of Bilingual Students</p> <p>Axis Integrated Mental Health. (n.d.) Colorado's Mental Health Crisis. Retrieved March 24, 2026 <a href="https://axismh.com/where-does-colorado-rank-for-mental-health-2025-update/#:~:text=Colorado%20doesn't%20just%20have,of%20care%20%20and%20financial%20instability.">https://axismh.com/where-does-colorado-rank-for-mental-health-2025-update/#:~:text=Colorado%20doesn't%20just%20have,of%20care%20%20and%20financial%20instability.</a></p> <p>Together Colorado <a href="https://www.togethercolorado.org/">https://www.togethercolorado.org/</a></p> |
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TO: The Honorable Kyle Mullica, Chair; The Honorable Iman Jodeh, Vice Chair; and Members of the Senate Health & Human Services Committee  
FROM: Colorado Foundation for Universal Health Care  
DATE: March 22, 2026

RE: Support for HB26-1002 – Provider Participation in Health Insurance

Chairman Mullica and members of the Committee,

Thank you for the opportunity to provide written testimony in support of HB26-1002. This bill addresses unnecessary barriers to behavioral health access in Colorado by correcting problems with how providers interface with insurance networks, increasing the number of qualified providers and ensuring that patients can actually use the benefits they pay for.

Currently, Coloradans seeking mental health or substance use disorder treatment are nearly 11 times more likely to be forced into using costly out-of-network providers compared to those seeking physical health care: <https://www.rti.org/publication/behavioral-health-parity-pervasive-disparities-access-network-care-continue/fulltext.pdf> This disparity is driven by "ghost networks" of inactive clinicians—and cumbersome administrative hurdles that keep qualified professionals out of insurance networks.

HB26-1002 strengthens our behavioral health workforce and improves patient access by tackling "Ghost Networks" in that it requires carriers to contact providers who have not submitted a claim in 12 months (6 months for Medicaid) to verify their active status and whether they are accepting new patients. This ensures patients have accurate information when seeking urgent care. The bill further mandates that carriers admit and reimburse prelicensed professionals working under supervision to expand the pool of available clinicians while also establishing timely standards for credentialing mental health and substance use disorder providers, thereby reducing the wait times that currently prevent qualified providers from seeing patients. Finally, by reducing the required supervised clinical hours for clinical social workers from 3,600 to 3,000, Colorado can more quickly license qualified professionals without compromising care quality.

The Colorado Foundation for Universal Health Care respectfully urges a YES vote on HB26-1002.

Respectfully submitted,

A handwritten signature in black ink that reads "James R. Potter".

James R. Potter  
Legislative Advocate and Board Member