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Good afternoon, Chairperson and members of the Committee. My name is Sandra Lamb, and I am a volunteer advocate with AARP Colorado, testifying on behalf of AARP's more than 670,000 Colorado members.

AARP is a nonpartisan, nonprofit organization dedicated to empowering people to choose how they live as they age — fighting for the health, financial security, and well-being of people 50 and older. We are committed to ensuring emerging technologies serve, rather than harm, older Coloradans.

AARP Colorado supports HB26-1139, which takes important steps to protect consumers from unchecked use of artificial intelligence in mental health services.

Older adults are disproportionately heavy users of healthcare services, making them especially vulnerable when AI systems influence mental health decisions without proper safeguards. AARP members have experienced algorithmic denials — computer-generated determinations based on group data, rather than individual circumstances, standing between patients and the care they need.

As AI-powered mental health tools — including chatbots marketed as therapeutic companions — proliferate, older adults and their families deserve clear protections distinguishing a licensed mental health professional from an AI system.

**On utilization review, Section 2:** AARP strongly supports requiring that AI used in utilization review not base coverage determinations solely on group data, and that denials involving mental health necessity be reviewed by a licensed clinician. Older patients often have complex, individualized care needs that population-level algorithms systematically disadvantage.

**On mental health chatbots, Sections 3, 5, 6, and 7:** AARP supports robust protections against AI systems that misrepresent themselves as licensed providers — including prohibitions on using regulated professional titles, delivering unsupervised psychotherapy, or failing to disclose AI use. We particularly support the requirement that chatbots clearly disclose they are not human; the mandate for protocols addressing suicidal ideation and crisis referrals; and the prohibition on selling identifiable mental health data. Older adults experiencing isolation, grief, or cognitive decline may be especially susceptible to over-relying on these tools.



**On transparency, Section 4:** AARP supports requiring licensed professionals to inform clients when AI plays a role in their care. Informed consent is foundational to the therapeutic relationship.

**On billing Prohibitions, Sections 2 and 7:** AARP strongly supports prohibiting billing for psychotherapy delivered directly by AI. Billing for AI-delivered care as equivalent to licensed professional services is both misleading and wasteful. Coloradans deserve mental health services grounded in human judgment and clinical accountability. HB26-1139 establishes reasonable guardrails ensuring that coverage and treatment decisions remain anchored in human expertise.

AARP Colorado urges the committee to pass HB26-1139. Thank you for the opportunity to testify.

# Boulder Emotional Wellness

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Dear Health and Human Services Committee,

Boulder Emotional Wellness has served Colorado with outpatient psychotherapy services since 2008, and currently provides over 19,000 counseling sessions per year with 54 therapists statewide and in the Boulder metro, using modern trauma resolving techniques such as Internal Family Systems, EMDR, PACT, DBT, and other evidence based modalities. Over 70% of our clients are enrolled in Medicaid.

Representative Joseph's "Use of Artificial Intelligence in Health Care" (HB26-1139) is an excellently balanced bill, crafted through stakeholder meetings, with software developers, institutional deployers of software, and counselors in frank discussions.

The bill has a narrow definition of what is to be regulated, allowing for product development for claim revenue management, back office utilization management, therapy-adjacent applications such as transcription, evaluation, and client education.

Ultimately the healing mechanism of psychotherapy is the availability of a regulated, accurately attuned, nonjudgemental human nervous system, where the client can experience "one foot in the present and one foot in the past" in order to resolve past overwhelming experiences. The "talk therapy" is misnamed, and should be called "the listening therapy."

While computer systems can be tremendous assistance for the counseling task, expecting nervous system activation and resolution in the relationship between a person and a machine is not realistic in the context of science.

We ask for your support for HB26-1139

In kind regards,  
Andrew Rose LPC  
Director, Boulder Emotional Wellness