Fiscal Note

Legislative Council Staff

Nonpartisan Services for Colorado's Legislature

HB 26-1044: MEASURES TO IMPROVE BLACK MATERNAL HEALTH EQUITY

Prime Sponsors:
Rep. English; Joseph
Sen. Exum; Benavidez

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Bill Outcome: Signed into Law
Drafting Number: LLS 26-0029

Version: Final Fiscal Note
Date: June 26, 2026

Fiscal note status: The final fiscal note reflects the enacted bill.

Summary Information

Overview. This bill establishes several requirements intended to improve equity in maternal health.

Types of impacts. The bill is projected to affect the following areas on an ongoing basis:

- Minimal State Revenue
- Minimal State Workload

Appropriations. No appropriation is required.

Table 1
State Fiscal Impacts

Type of Impact	Budget Year FY 2026-27	Out Year FY 2027-28
State Revenue	$0	$0
State Expenditures	$0	$0
Transferred Funds	$0	$0
Change in TABOR Refunds	$0	$0
Change in State FTE	0.0 FTE	0.0 FTE

Summary of Legislation

This bill establishes several authorizations related to maternal health equity, including allowing for a statewide birthing parent survey, codification of the Maternal Health Task Force, requirements related to physician continuing medical education, and requirements for health facilities to make available a statement of birthing parent's rights.

Statewide Birthing Parent Survey

Under current law, the Department of Public Health and Environment (CDPHE) is required to develop and implement a multi-year health survey to birthing parents. The bill authorizes the CDPHE to implement an additional standardized survey to Coloradans who have recently given birth, subject to available appropriations.

Maternal Health Oversight and Reporting

The bill codifies the existing Maternal Health Task Force, subject to available grant funding, and requires the CDPHE to ensure that at least one maternal health advocate representing populations known to have the worst maternal mortality outcomes serves on the task force. The bill also adds a requirement to include certain maternal health outcomes identified for populations with the worst maternal mortality outcomes in Colorado to an existing CDPHE report on maternal health.

Professional Training Requirements

The bill requires the State Medical Board in the Department of Regulatory Agencies (DORA) to include cultural competence and equity in maternal care as part of its existing stakeholder process and rulemaking for continuing medical education (CME) requirements.

Required Notice to Birthing Parents

By January 1, 2027, health facilities must provide birthing parents and their family members with a notice of the components of respectful labor and childbirth, with specific inclusions for the notice outlined in the bill.

State Expenditures

Beginning in FY 2026-27, the bill minimally increases workload in the CDPHE and DORA, as discussed below.

Department of Public Health and Environment

Costs in the CDPHE may increase for the department to develop and distribute a statewide birthing survey to additional individuals. Since this requirement is permissive, the fiscal note has

not included costs for this survey; it is assumed that any expenditures incurred to survey additional individuals will be addressed through the annual budget process when the survey scope is defined. Workload will also minimally increase for the department to conduct rulemaking related to the required notice to birthing parents, which the fiscal note assumes will be accomplished within existing appropriations. The addition of maternal health outcomes for certain populations in the existing report can also be accomplished withing existing appropriations.

Department of Regulatory Agencies

Workload in the Division of Professions and Occupations in DORA will minimally increase to conduct limited rulemaking and provide information and outreach to licensees. These activities are absorbable withing existing resources and no additional appropriation is required.

Effective Date

The bill was signed into law by the Governor and took effect on May 5, 2026.

Departmental Difference

The CDPHE estimates that the bill requires $16,449 in FY 2026-27 and $14,902 in FY 2027-28 to conduct rulemaking for health facilities to develop and provide a statement of birthing parent's rights. This assumption is based on ten stakeholder meetings and associated internal work.

The fiscal note assumes that any rulemaking required under the bill is limited in scope and primarily codifies statutory language related to the statement of birthing parent's rights. The bill does not expressly establish new enforcement authority or oversight responsibilities for the department beyond existing facility licensing authority. Under this assumption, any rulemaking activities are expected to be minor and absorbable within existing appropriations.

State and Local Government Contacts

Health Care Policy and Financing
Higher Education
Law
Personnel
Public Health and Environment
Regulatory Agencies