

SENATE COMMITTEE OF REFERENCE REPORT

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Chairman of Committee

April 13, 2016  
Date

Committee on Health & Human Services.

After consideration on the merits, the Committee recommends the following:

SB16-162 be amended as follows, and as so amended, be referred to the Committee of the Whole with favorable recommendation:

1 Amend printed bill, page 2, line 3, strike "(II)" and substitute "(II); and  
2 **add** (1) (a) (II.2) and (1) (a) (II.3)".

3 Page 2, after line 23 insert:

4 "(II.2) A PROVIDER OF MEDICAL SERVICES THAT IS NOT ENROLLED  
5 IN THE COLORADO MEDICAL ASSISTANCE PROGRAM THAT PROVIDES  
6 MEDICAL SERVICES TO A RECIPIENT, REGARDLESS OF WHETHER THE  
7 SERVICES ARE REIMBURSABLE OR NONREIMBURSABLE UNDER THE  
8 MEDICAL ASSISTANCE PROGRAM, SHALL NOT CHARGE THE RECIPIENT MORE  
9 THAN THE USUAL AND CUSTOMARY RATE FOR THE MEDICAL SERVICES.

10 (II.3) IF A PROVIDER OF MEDICAL SERVICES THAT IS NOT ENROLLED  
11 IN THE COLORADO MEDICAL ASSISTANCE PROGRAM PROVIDES MEDICAL  
12 SERVICES TO A RECIPIENT THAT WOULD BE REIMBURSABLE UNDER THE  
13 MEDICAL ASSISTANCE PROGRAM IF THE PROVIDER WERE AN ENROLLED  
14 PROVIDER OR THAT WOULD NOT BE NONREIMBURSABLE UNDER THE  
15 MEDICAL ASSISTANCE PROGRAM, PRIOR TO PROVIDING MEDICAL SERVICES,  
16 THE PROVIDER SHALL ENTER INTO A DOCUMENTED AGREEMENT WITH THE  
17 RECIPIENT. THE AGREEMENT MUST SET FORTH THE SPECIFIC MEDICAL  
18 SERVICES PROVIDED, THE USUAL AND CUSTOMARY COST FOR THE  
19 SERVICES, THE COST TO THE RECIPIENT FOR THE SERVICES PROVIDED, AND  
20 THE METHOD OF PAYMENT BY THE CLIENT. THE AGREEMENT MUST ALSO  
21 INCLUDE THE STATEMENT THAT THE RECIPIENT UNDERSTANDS THAT HE OR

1 SHE WOULD NOT BE LIABLE FOR THE COST OF REIMBURSABLE MEDICAL  
2 SERVICES IF THE RECIPIENT OBTAINED THE SERVICES FROM AN ENROLLED  
3 PROVIDER. THE AGREEMENT MUST BE SIGNED AND DATED BY BOTH THE  
4 RECIPIENT AND THE PROVIDER. UNDER THESE CIRCUMSTANCES, THE  
5 RECIPIENT IS LIABLE FOR THE COST OF THE MEDICAL SERVICES."

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