

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

INTRODUCED

LLS NO. 23-0532.03 Brita Darling x2241

SENATE BILL 23-189

SENATE SPONSORSHIP

Moreno and Cutter, Gonzales, Jaquez Lewis, Marchman, Winter F.

HOUSE SPONSORSHIP

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

Senate Committees
Health & Human Services

House Committees

A BILL FOR AN ACT

101 **CONCERNING INCREASING ACCESS TO REPRODUCTIVE HEALTH-CARE**
102 **SERVICES.**

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 <http://leg.colorado.gov>.)

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 health resources and services administration in the United

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
*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.*

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 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:*

2 **SECTION 1.** In Colorado Revised Statutes, 10-16-102, **amend**
3 (38.5) as follows:

4 **10-16-102. Definitions.** As used in this article 16, unless the
5 context otherwise requires:

6 (38.5) "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)(A), 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
19 A or B recommendations of the task force for the particular preventive

1 health-care service:

2 (X) (A) Any other preventive services included in the WOMEN'S
3 PREVENTIVE SERVICES GUIDELINES PREPARED BY THE HEALTH RESOURCES
4 AND SERVICES ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF
5 HEALTH AND HUMAN SERVICES, INCLUDED IN AN A or A B
6 recommendation of the task force, or required by federal law.

7 (b.3) (I) THE COVERAGE FOR SEXUALLY TRANSMITTED INFECTION
8 COUNSELING, PREVENTION, AND SCREENING REQUIRED IN SUBSECTION
9 (18)(b)(XI) OF THIS SECTION MUST INCLUDE COVERAGE FOR HIV
10 PREVENTION DRUGS AND THE SERVICES NECESSARY FOR INITIATION AND
11 CONTINUED USE OF AN HIV PREVENTION DRUG BASED ON THE MOST
12 RECENT CDC GUIDELINES AND CLINICAL GUIDANCE AND AS DETERMINED
13 BY THE INDIVIDUAL'S HEALTH-CARE PROVIDER, INCLUDING:

14 (A) PROVIDER OFFICE AND TELEHEALTH VISITS FOR PRESCRIBING
15 AND MEDICATION MANAGEMENT;

16 (B) HIV TESTING;

17 (C) KIDNEY FUNCTION TESTING;

18 (D) SEROLOGIC TESTING FOR HEPATITIS B AND C VIRUSES;

19 (E) HEPATITIS B VACCINATION;

20 (F) TESTING FOR OTHER SEXUALLY TRANSMITTED INFECTIONS,
21 INCLUDING THREE-SITE TESTING FOR GONORRHEA AND CHLAMYDIA;

22 (G) PREGNANCY TESTING; AND

23 (H) ONGOING FOLLOW-UP AND MONITORING EVERY THREE
24 MONTHS.

25 (II) AS USED IN THIS SUBSECTION (18)(b.3), "CDC" HAS THE
26 MEANING SET FORTH IN SECTION 12-280-125.7 (1)(a).

27 (e) (I) A carrier shall reimburse a pharmacist employed by an

1 in-network pharmacy for prescribing and dispensing HIV ~~infection~~
2 prevention drugs to a covered person. A carrier shall provide a pharmacist
3 who prescribes and dispenses HIV ~~infection~~ prevention drugs to a
4 covered person pursuant to section 12-280-125.7 an adequate consultative
5 fee, or, if medical billing is not available, an enhanced dispensing fee,
6 that is equivalent or that is provided to a physician or advanced practice
7 registered nurse.

8 (26) **Abortion care - rules - definition.** (a) EXCEPT AS PROVIDED
9 IN SUBSECTION (26)(d) OF THIS SECTION AND SUBJECT TO THE PROVISIONS
10 OF SUBSECTIONS (26)(e) AND (26)(f) OF THIS SECTION, ALL INDIVIDUAL
11 AND SMALL GROUP HEALTH BENEFIT PLANS ISSUED OR RENEWED IN THIS
12 STATE SHALL PROVIDE COVERAGE FOR THE TOTAL COST OF ABORTION
13 CARE.

14 (b) THE COVERAGE REQUIRED PURSUANT TO THIS SUBSECTION (26)
15 IS NOT SUBJECT TO POLICY DEDUCTIBLES, COPAYMENTS, OR COINSURANCE;
16 EXCEPT THAT COPAYMENTS MAY APPLY AS REQUIRED BY A
17 GRANDFATHERED HEALTH BENEFIT PLAN.

18 (c) THE COMMISSIONER SHALL ADOPT RULES CONSISTENT WITH
19 AND AS ARE NECESSARY TO IMPLEMENT THIS SUBSECTION (26).

20 (d) TO THE EXTENT REQUIRED BY FEDERAL JUDICIAL DECISIONS
21 THAT ARE BINDING ON THE STATE, AN EMPLOYER IS NOT OBLIGATED TO
22 PROVIDE THE COVERAGE REQUIRED BY THIS SUBSECTION (26) IF PROVIDING
23 THE COVERAGE CONFLICTS WITH THE EMPLOYER'S SINCERELY HELD
24 RELIGIOUS BELIEFS.

25 (e) THIS SUBSECTION (26) APPLIES TO, AND THE DIVISION SHALL
26 IMPLEMENT THE REQUIREMENTS OF THIS SUBSECTION (26) FOR, LARGE
27 EMPLOYER HEALTH BENEFIT PLANS ISSUED OR RENEWED IN THIS STATE ON

1 OR AFTER JANUARY 1, 2025.

2 (f) WITH RESPECT TO INDIVIDUAL AND SMALL GROUP HEALTH
3 BENEFIT PLANS:

4 (I) THE DIVISION SHALL SUBMIT TO THE FEDERAL DEPARTMENT OF
5 HEALTH AND HUMAN SERVICES:

6 (A) THE DIVISION'S DETERMINATION AS TO WHETHER THE BENEFIT
7 SPECIFIED IN THIS SUBSECTION (26) IS IN ADDITION TO ESSENTIAL HEALTH
8 BENEFITS AND WOULD BE SUBJECT TO DEFRAID BY THE STATE PURSUANT
9 TO 42 U.S.C. SEC. 18031 (d)(3)(B); AND

10 (B) A REQUEST THAT THE FEDERAL DEPARTMENT OF HEALTH AND
11 HUMAN SERVICES CONFIRM THE DIVISION'S DETERMINATION WITHIN SIXTY
12 DAYS AFTER RECEIPT OF THE DIVISION'S REQUEST FOR CONFIRMATION OF
13 THE DETERMINATION.

14 (II) THIS SUBSECTION (26) APPLIES TO, AND THE DIVISION SHALL
15 IMPLEMENT THE REQUIREMENTS OF THIS SUBSECTION (26) FOR,
16 INDIVIDUAL AND SMALL GROUP HEALTH BENEFIT PLANS ISSUED OR
17 RENEWED IN THIS STATE UPON THE EARLIER OF:

18 (A) TWELVE MONTHS AFTER THE FEDERAL DEPARTMENT OF
19 HEALTH AND HUMAN SERVICES CONFIRMS THAT THE COVERAGE SPECIFIED
20 IN THIS SUBSECTION (26) DOES NOT CONSTITUTE AN ADDITIONAL BENEFIT
21 THAT REQUIRES DEFRAID BY THE STATE PURSUANT TO 42 U.S.C. SEC.
22 18031 (d)(3)(B);

23 (B) TWELVE MONTHS AFTER THE FEDERAL DEPARTMENT OF
24 HEALTH AND HUMAN SERVICES OTHERWISE INFORMS THE DIVISION THAT
25 THE COVERAGE IN THIS SUBSECTION (26) DOES NOT REQUIRE STATE
26 DEFRAID PURSUANT TO 42 U.S.C. SEC. 18031 (d)(3)(B); OR

27 (C) THE PASSAGE OF MORE THAN THREE HUNDRED SIXTY-FIVE

1 DAYS SINCE THE DIVISION SUBMITTED ITS DETERMINATION AND REQUEST
2 FOR CONFIRMATION PURSUANT TO SUBSECTION (26)(f)(I) OF THIS SECTION,
3 AND THE FEDERAL DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS
4 FAILED TO RESPOND TO THE REQUEST WITHIN THAT PERIOD, IN WHICH CASE
5 THE DIVISION SHALL CONSIDER THE FEDERAL DEPARTMENT'S
6 UNREASONABLE DELAY A PRECLUSION FROM REQUIRING DEFRAYAL BY THE
7 STATE.

8 (g) AS USED IN THIS SUBSECTION (26), "ABORTION CARE" HAS THE
9 SAME MEANING AS "ABORTION", AS DEFINED IN SECTION 25-6-402 (1).

10 **SECTION 3.** In Colorado Revised Statutes, **amend** 10-16-152 as
11 follows:

12 **10-16-152. HIV prevention and treatment medication -**
13 **limitations on carriers - step therapy - prior authorization.** A carrier
14 shall not require a covered person to undergo step therapy or to receive
15 prior authorization before a pharmacist may, pursuant to section
16 12-280-125.7, prescribe ~~and~~ OR dispense an HIV ~~infection~~ prevention
17 drug, OR A PROVIDER MAY, ACTING WITHIN THE PROVIDER'S SCOPE OF
18 PRACTICE, PRESCRIBE OR DISPENSE A DRUG FOR THE TREATMENT OF HIV.

19 **SECTION 4.** In Colorado Revised Statutes, **add** 10-16-158 and
20 10-16-159 as follows:

21 **10-16-158. Treatment of sexually transmitted infection - cost**
22 **sharing.** A CARRIER THAT PROVIDES COVERAGE FOR THE TREATMENT OF
23 A SEXUALLY TRANSMITTED INFECTION, AS DEFINED IN SECTION 25-4-402
24 (10), IN A HEALTH BENEFIT PLAN MUST PROVIDE COVERAGE WITHOUT
25 DEDUCTIBLES, COPAYMENTS, COINSURANCE, ANNUAL OR LIFETIME
26 MAXIMUM BENEFIT LIMITS, OR OTHER COST SHARING FOR OR LIMITS ON
27 THE COVERAGE FOR THE TREATMENT OF A SEXUALLY TRANSMITTED

1 INFECTION.

2 **10-16-159. Coverage for sterilization services - cost sharing.**

3 A CARRIER THAT PROVIDES COVERAGE FOR STERILIZATION SERVICES IN A
4 HEALTH BENEFIT PLAN MUST PROVIDE COVERAGE REGARDLESS OF THE
5 COVERED PERSON'S SEX OR GENDER AND WITHOUT DEDUCTIBLES,
6 COPAYMENTS, COINSURANCE, ANNUAL OR LIFETIME MAXIMUM BENEFIT
7 LIMITS, OR OTHER COST SHARING FOR OR LIMITS ON THE COVERAGE FOR
8 STERILIZATION SERVICES.

9 **SECTION 5.** In Colorado Revised Statutes, 12-280-125.7,
10 **amend** (1) introductory portion, (1)(c), (2), (3) introductory portion,
11 (5)(a), and (5)(b) as follows:

12 **12-280-125.7. Pharmacists' authority to prescribe and**
13 **dispense HIV prevention drugs - definitions - rules.** (1) As used in this
14 section, UNLESS THE CONTEXT OTHERWISE REQUIRES:

15 (c) "HIV ~~infection~~ prevention drug" means preexposure
16 prophylaxis, post-exposure prophylaxis, or other drugs approved by the
17 FDA for the prevention of HIV infection.

18 (2) A pharmacist may prescribe and dispense HIV ~~infection~~
19 prevention drugs in accordance with a standing order pursuant to section
20 25-1-130 or a statewide drug therapy protocol developed pursuant to
21 subsection (5) of this section.

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

24 (5) (a) On or before six months after July 13, 2020, the state board
25 of pharmacy, the Colorado medical board, and the state board of nursing
26 shall, in collaboration with the department of public health and
27 environment, and as described in section 12-280-601 (1)(b), develop

1 statewide drug therapy protocols for pharmacists to prescribe and
2 dispense HIV infection prevention drugs.

3 (b) If the state board of pharmacy, the Colorado medical board,
4 and the state board of nursing are not able to agree in the time period
5 required by subsection (5)(a) of this section to statewide drug therapy
6 protocols for pharmacists to prescribe and dispense HIV infection
7 prevention drugs, the state board of pharmacy shall collaborate with the
8 department of public health and environment to develop and implement
9 statewide drug therapy protocols by January 1, 2021.

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

12 **13-22-105. Minors - consent - contraception.** ~~Birth control~~
13 WITH THE MINOR'S CONSENT, A HEALTH-CARE PROVIDER LICENSED,
14 CERTIFIED, OR REGISTERED PURSUANT TO TITLE 12 WHO IS ACTING WITHIN
15 THE HEALTH-CARE PROVIDER'S SCOPE OF PRACTICE MAY FURNISH
16 CONTRACEPTIVE procedures, supplies, ~~and~~ OR information ~~may be~~
17 ~~furnished by physicians licensed under article 240 of title 12 to any~~ A
18 ~~minor who is pregnant, or a parent, or married, or who has the consent of~~
19 ~~the minor's parent or legal guardian, or who has been referred for such~~
20 ~~services by another physician, a member of the clergy, a family planning~~
21 ~~clinic, a school or institution of higher education, or any agency or~~
22 ~~instrumentality of this state or any subdivision thereof, or who requests~~
23 ~~and is in need of birth control procedures, supplies, or information~~
24 WITHOUT NOTIFICATION TO OR THE CONSENT OF THE MINOR'S PARENT OR
25 PARENTS, LEGAL GUARDIAN, OR ANY OTHER PERSON HAVING CUSTODY OF
26 OR DECISION-MAKING RESPONSIBILITY FOR THE MINOR.

27 **SECTION 7.** In Colorado Revised Statutes, 25.5-2-103, **amend**

1 (2), (6), and (7)(c); **repeal** (1)(a); and **add** (1)(g), (2.5), and (5.5) as
2 follows:

3 **25.5-2-103. Reproductive health-care program - report - rules**
4 **- definitions.** (1) As used in this section, unless the context otherwise
5 requires:

- 6 (a) ~~"Contraceptive methods and counseling services" means:~~
- 7 ~~(I) Any FDA-approved contraceptive drug, device, or product;~~
- 8 ~~(II) Services related to the administration and monitoring of~~
9 ~~FDA-approved contraceptive drugs, devices, and products, including~~
10 ~~management of side effects;~~
- 11 ~~(III) Counseling services for continued adherence to a prescribed~~
12 ~~regimen;~~
- 13 ~~(IV) Device insertion and removal; and~~
- 14 ~~(V) Any other contraceptive methods and counseling services~~
15 ~~identified by the health resources and services administration in the~~
16 ~~United States department of health and human services or the Women's~~
17 ~~Preventive Services Guidelines as of December 17, 2019.~~

18 (g) "REPRODUCTIVE HEALTH-CARE SERVICES" MEANS FAMILY
19 PLANNING SERVICES, AS DEFINED IN SECTION 25.5-4-412 (2)(b), AND
20 FAMILY-PLANNING-RELATED SERVICES, AS DEFINED IN SECTION 25.5-4-412
21 (2)(a).

22 (2) On and after July 1, 2022, the state department shall
23 administer a reproductive health-care program, referred to in this section
24 as the "program", that provides ~~contraceptive methods and counseling~~
25 REPRODUCTIVE HEALTH-CARE services to participants.

26 (2.5) ELIGIBLE INDIVIDUALS WHO ARE UNDER NINETEEN YEARS OF
27 AGE MAY APPLY FOR AND ENROLL THEMSELVES IN THE PROGRAM.

1 (5.5) (a) THE STATE DEPARTMENT SHALL WORK WITH
2 STAKEHOLDERS TO IDENTIFY WAYS FOR ELIGIBLE INDIVIDUALS WHO ARE
3 UNDER NINETEEN YEARS OF AGE TO APPLY FOR AND ENROLL THEMSELVES
4 IN THE PROGRAM BASED ON THEIR INDIVIDUAL INCOME.

5 (b) TO THE EXTENT PRACTICABLE, THE STATE DEPARTMENT SHALL
6 ENSURE THAT ELIGIBLE INDIVIDUALS SEEKING TO PARTICIPATE IN THE
7 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:

1 (f.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 **SECTION 9.** In Colorado Revised Statutes, **add** 25.5-2-106 as
5 follows:

6 **25.5-2-106. Reimbursement for family planning and**
7 **family-planning-related services - minors - cash fund.** (1) THE STATE
8 DEPARTMENT SHALL REIMBURSE A LICENSED HEALTH-CARE PROVIDER FOR
9 REPRODUCTIVE HEALTH-CARE SERVICES, AS DEFINED IN SECTION
10 25.5-2-103 (1)(g), PROVIDED TO A MINOR FROM THE REPRODUCTIVE
11 PRIVACY CASH FUND CREATED IN SUBSECTION (2) OF THIS SECTION.

12 (2) (a) THE REPRODUCTIVE PRIVACY CASH FUND, REFERRED TO IN
13 THIS SECTION AS THE "FUND", IS CREATED IN THE STATE TREASURY. THE
14 FUND CONSISTS OF MONEY THAT THE GENERAL ASSEMBLY MAY
15 APPROPRIATE OR TRANSFER TO THE FUND. THE STATE TREASURER SHALL
16 CREDIT ALL INTEREST AND INCOME DERIVED FROM THE DEPOSIT AND
17 INVESTMENT OF MONEY IN THE FUND TO THE FUND. ANY UNEXPENDED
18 AND UNENCUMBERED MONEY REMAINS IN THE FUND AND SHALL NOT BE
19 TRANSFERRED TO THE GENERAL FUND AT THE END OF ANY FISCAL YEAR.

20 (b) SUBJECT TO ANNUAL APPROPRIATION BY THE GENERAL
21 ASSEMBLY, THE STATE DEPARTMENT MAY EXPEND MONEY FROM THE FUND
22 FOR REPRODUCTIVE HEALTH-CARE SERVICES, AS DEFINED IN SECTION
23 25.5-2-103 (1)(g), PROVIDED TO A MINOR PURSUANT TO SUBSECTION (1)
24 OF THIS SECTION.

25 **SECTION 10.** In Colorado Revised Statutes, 24-75-402, **add**
26 (5)(aaa) as follows:

27 **24-75-402. Cash funds - limit on uncommitted reserves -**

1 **reduction in the amount of fees - exclusions - definitions.**

2 (5) Notwithstanding any provision of this section to the contrary, the
3 following cash funds are excluded from the limitations specified in this
4 section:

5 (aaa) THE REPRODUCTIVE PRIVACY CASH FUND CREATED IN
6 SECTION 25.5-2-106 (2).

7 **SECTION 11.** In Colorado Revised Statutes, 25.5-5-324, **add**
8 (3.5) as follows:

9 **25.5-5-324. Nonemergency medical transportation - urgent**
10 **and secure transportation need - report - repeal.**

11 (3.5) TRANSPORTATION SERVICES INCLUDE EXPENSES FOR
12 TRANSPORTATION TO MEDICAL SERVICES THAT ARE PROHIBITED FROM
13 COVERAGE PURSUANT TO SECTION 50 OF ARTICLE V OF THE COLORADO
14 CONSTITUTION.

15 **SECTION 12.** In Colorado Revised Statutes, **add** 25.5-5-514 as
16 follows:

17 **25.5-5-514. Prescription drugs used for treatment or**
18 **prevention of HIV - prohibition on utilization management -**
19 **definition.** (1) AS USED IN THIS SECTION, "HIV" MEANS HUMAN
20 IMMUNODEFICIENCY VIRUS.

21 (2) THE STATE DEPARTMENT SHALL NOT APPLY UTILIZATION
22 MANAGEMENT, INCLUDING STEP THERAPY OR PRIOR AUTHORIZATION
23 REQUIREMENTS, TO ANY PRESCRIPTION DRUG USED FOR THE TREATMENT
24 OR PREVENTION OF HIV IF A PRESCRIBING PRACTITIONER LICENSED
25 PURSUANT TO TITLE 12 HAS DETERMINED THE PRESCRIPTION DRUG TO BE
26 MEDICALLY NECESSARY FOR THE TREATMENT OR PREVENTION OF HIV FOR
27 A RECIPIENT. PRESCRIPTION DRUGS USED FOR THE TREATMENT OR

1 PREVENTION OF HIV INCLUDE PROTEASE INHIBITORS, NON-NUCLEOSIDE
2 REVERSE TRANSCRIPTASE INHIBITORS, NUCLEOSIDE REVERSE
3 TRANSCRIPTASE INHIBITORS, ANTIVIRALS, INTEGRASE INHIBITORS, LONG
4 ACTING MEDICATIONS, AND FUSION INHIBITORS.

5 **SECTION 13. Safety clause.** The general assembly hereby finds,
6 determines, and declares that this act is necessary for the immediate
7 preservation of the public peace, health, or safety.