



## Health Care and Insurance

The General Assembly adopted several measures during the 2021 legislative session related to health care and insurance.

### Health Care

The legislature passed bills that expanded family planning services and the use of alternative medicine for Medicaid participants. They also created a mechanism for the review of prescription drugs.

*Senate Bill 21-009* requires the Department of Health Care Policy and Financing (HCPF) to administer a reproductive health care program that provides contraceptive methods and counseling services to participants. The program must offer each participant at least a one-year supply of the requested contraceptive method or an alternative contraceptive method and not impose cost-sharing requirements.

*Senate Bill 21-175* creates the Prescription Drug Affordability Review Board. The board is directed to:

- collect and evaluate information on the cost of prescription drugs sold to Colorado consumers;
- perform affordability reviews;
- establish prescription drug an upper payment limit for any prescription drug for which the board determines that the use of the drug is

unaffordable, capped at 12 drugs in each of the first three years;

- make policy recommendations to the General Assembly to improve drug affordability; and
- report annually to the Governor and General Assembly on drug prices, board activity, and impacts to health care providers and pharmacies.

The bill also requires specific reporting regarding the cost of prescription drugs to the Division of Insurance (DOI) by health insurers and pharmacy benefit managers.

The complementary or alternative medicine pilot program currently applies to persons with a spinal cord injury. *Senate Bill 21-038* expands the pilot program to all individuals with a primary condition of multiple sclerosis, a brain injury, spina bifida, muscular dystrophy, or cerebral palsy, with the total inability for independent ambulation directly resulting from one of these diagnoses.

*Senate Bill 21-123* authorizes HCPF to expand the Canadian Drug Importation Program to allow drug importation from nations other than Canada, conditional upon the enactment of federal legislation permitting states to do so.

### Insurance

Several bills adopted by the General Assembly expanded health care services that must be covered by Medicaid and state-regulated health

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## Health Care and Insurance (cont'd)

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insurance plans. The General Assembly also adopted legislation restricting the use of consumer data by insurers.

*House Bill 21-1068* requires that health plans cover an annual mental health wellness examination of up to 60 minutes performed by a qualified mental health care provider as part of the mandatory health insurance coverage for preventative health care services. The coverage must be comparable to the coverage of a physical examination, comply with the requirements of federal mental health parity laws, and not require any deductibles, copayments, or coinsurance.

The coverage applies to large employer plans issued or renewed on or after January 1, 2022, and to individual and small group plans issued or renewed on or after January 1, 2023. DOI is directed to conduct an actuarial study to determine the effect of the coverage on insurance premiums.

*House Bill 21-1232* directs the Commissioner of Insurance to develop a standardized health insurance plan by January 1, 2022 that private health insurance carriers will be required to offer in the individual and small group market segments.

The plan must be developed through a stakeholder engagement process, must offer coverage at the bronze, silver, and gold coverage levels, and must include pediatric care and all essential health benefits as established by the Commissioner of Insurance. It may be updated annually. An advisory board made up of 11 Governor appointees is created to advise and assist with implementation. Beginning January 1, 2023, insurance carriers are required to offer the standardized plan in any county where they offer coverage in the individual and/or small group markets. In addition, the commissioner may require a carrier to offer the standardized plan in specific counties where no carrier is offering the plan. Standardized plans must be offered at premium rates at least 6 percent less than the plans that carrier offered in the 2021

calendar year, adjusted for medical inflation. For 2024 and 2025, the plans must be offered at premium rates at least 12 percent and 18 percent less, respectively. Beginning in 2026, premiums may increase by no more than medical inflation.

The commissioner must seek a State Innovation Waiver from the federal Department of Health and Human Services to implement the bill and to identify savings to the federal government attributable to the bill.

*Senate Bill 21-016* expands family planning and other related services that are covered under state-regulated health insurance plans and Medicaid. The expanded services include counseling, prevention, screening for a sexually transmitted infection, and contraception. The bill allows individuals to obtain these services from any licensed health care provider. These services are not subject to policy deductibles, copayments, or coinsurance.

The consent of a parent is not a prerequisite for a minor to receive preventive care, but a health-care provider shall counsel the minor on the importance of bringing the minor's parent or legal guardian into the minor's confidence regarding the services.

*Senate Bill 21-169* prohibits an insurer with regard to any insurance practice from: unfairly discriminating based on an individual's race, color, national or ethnic origin, religion, sex, sexual orientation, disability, gender identity, or gender expression; or pursuant to rules adopted by the Commissioner of Insurance, using any external consumer data and information sources, algorithms, or predictive models that unfairly discriminates against an individual based on an individual's race, color, national or ethnic origin, religion, sex, sexual orientation, disability, gender identity, or gender expression.