

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

INTRODUCED

LLS NO. 17-0871.02 Christy Chase x2008

SENATE BILL 17-300

SENATE SPONSORSHIP

Lambert,

HOUSE SPONSORSHIP

Kennedy,

Senate Committees

Health & Human Services

House Committees

A BILL FOR AN ACT

101 **CONCERNING THE AUTHORITY OF THE COMMISSIONER OF INSURANCE**
102 **TO IMPLEMENT PROGRAMS TO ADDRESS THE RISING COSTS OF**
103 **PROVIDING HEALTH CARE COVERAGE TO HIGH-RISK**
104 **INDIVIDUALS IN THE STATE.**

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>.)

The bill authorizes the commissioner of insurance to:

- ! Develop a high-risk health care coverage program to address access to coverage for individuals with high-cost

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.

- medical conditions and to reduce health insurance premiums;
- ! Apply for a waiver under federal law to implement the program;
- ! Seek, accept, and expend public and private gifts, grants, and donations to implement the bill.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, **add** article 22.5 to title 10 as follows:

ARTICLE 22.5

Colorado High-risk Health Care Coverage Act

10-22.5-101. Short title. THE SHORT TITLE OF THIS ARTICLE 22.5 IS THE "COLORADO HIGH-RISK HEALTH CARE COVERAGE ACT".

10-22.5-102. Legislative declaration. (1) THE GENERAL ASSEMBLY HEREBY DECLARES THAT THE PURPOSE OF THIS ARTICLE 22.5 IS TO AUTHORIZE THE COMMISSIONER OF INSURANCE AND THE DIVISION OF INSURANCE TO:

(a) DEVELOP AND IMPLEMENT AN INNOVATIVE PROGRAM TO PROVIDE ACCESS TO HEALTH CARE COVERAGE FOR THOSE COLORADO RESIDENTS WHO ARE CONSIDERED "HIGH RISK" BECAUSE OF A MEDICAL CONDITION AND TO REDUCE HEALTH INSURANCE PREMIUMS IN THE INDIVIDUAL HEALTH INSURANCE MARKET;

(b) SEEK AUTHORIZATION, THROUGH THE WAIVER PROCESS AUTHORIZED UNDER THE FEDERAL ACT OR ANY OTHER MANNER PROVIDED UNDER FEDERAL LAW, TO IMPLEMENT AN INNOVATIVE PROGRAM TO PROVIDE HEALTH CARE COVERAGE TO HIGH-RISK INDIVIDUALS IN THE STATE; AND

(c) APPLY FOR, ACCEPT, AND EXPEND PUBLIC AND PRIVATE GIFTS,

1 GRANTS, AND DONATIONS TO DEVELOP, SEEK FEDERAL AUTHORIZATION
2 FOR, AND IMPLEMENT AN INNOVATIVE HIGH-RISK HEALTH CARE COVERAGE
3 PROGRAM.

4 **10-22.5-103. Definitions.** AS USED IN THIS ARTICLE 22.5, UNLESS
5 THE CONTEXT OTHERWISE REQUIRES:

6 (1) "CARRIER" HAS THE SAME MEANING AS SET FORTH IN SECTION
7 10-16-102 (8).

8 (2) "COMMISSIONER" MEANS THE COMMISSIONER OF INSURANCE
9 OR THE COMMISSIONER'S DESIGNEE.

10 (3) "DIVISION" MEANS THE DIVISION OF INSURANCE ESTABLISHED
11 IN SECTION 10-1-103.

12 (4) "FEDERAL ACT" MEANS THE "PATIENT PROTECTION AND
13 AFFORDABLE CARE ACT", PUB.L. 111-148, AS AMENDED BY THE "HEALTH
14 CARE AND EDUCATION RECONCILIATION ACT OF 2010", PUB.L. 111-152,
15 AND AS MAY BE FURTHER AMENDED, AND INCLUDING ANY FEDERAL
16 REGULATIONS ADOPTED UNDER THE FEDERAL ACT.

17 (5) "HIGH-RISK INDIVIDUAL" MEANS A RESIDENT OF THIS STATE
18 WHO IS DETERMINED TO BE HIGH RISK BECAUSE HE OR SHE HAS A MEDICAL
19 CONDITION THAT IS ON THE PRESUMPTIVE CONDITIONS LIST.

20 (6) "PRESUMPTIVE CONDITIONS LIST" MEANS THE LIST OF MEDICAL
21 CONDITIONS DEVELOPED BY THE COMMISSIONER BY RULE IN ACCORDANCE
22 WITH SECTION 10-22.5-104 (3).

23 (7) "PROGRAM" MEANS THE HIGH-RISK HEALTH CARE COVERAGE
24 PROGRAM DEVELOPED BY THE COMMISSIONER IN ACCORDANCE WITH
25 SECTION 10-22.5-104.

26 (8) "RESIDENT" MEANS AN INDIVIDUAL WHOSE PRINCIPAL OR
27 PRIMARY PLACE OF RESIDENCE, AS DEFINED IN SECTION 1-2-102, IS IN THE

1 STATE OF COLORADO AND WHO HAS BEEN A COLORADO RESIDENT FOR AT
2 LEAST SIX MONTHS.

3 **10-22.5-104. High-risk health care coverage program -**
4 **commissioner to develop - rules.** (1) THE COMMISSIONER SHALL
5 DEVELOP, BY RULE, A HIGH-RISK HEALTH CARE COVERAGE PROGRAM TO
6 PROVIDE HEALTH CARE COVERAGE TO HIGH-RISK INDIVIDUALS AND
7 REDUCE HEALTH INSURANCE PREMIUMS IN THE INDIVIDUAL MARKET. IN
8 DEVELOPING THE PROGRAM, THE COMMISSIONER AND THE DIVISION SHALL
9 ENGAGE WITH AND SEEK INPUT FROM CARRIERS, CONSUMER GROUPS, AND
10 OTHER INTERESTED STAKEHOLDERS.

11 (2) THE COMMISSIONER MAY EXAMINE VARIOUS OPTIONS FOR
12 PROVIDING HEALTH CARE COVERAGE FOR HIGH-RISK INDIVIDUALS AND
13 REDUCING PREMIUMS, INCLUDING CREATING A HIGH-RISK POOL OR A
14 REINSURANCE PROGRAM, AND SHALL DEVELOP A PROGRAM THAT MEETS
15 ANY REQUIREMENTS IMPOSED UNDER THE FEDERAL ACT OR OTHER
16 APPLICABLE FEDERAL LAWS AND REGULATIONS TO QUALIFY FOR FEDERAL
17 FINANCIAL SUPPORT.

18 (3) THE COMMISSIONER SHALL DEVELOP, BY RULE, A LIST OF
19 MEDICAL CONDITIONS, KNOWN AS THE "PRESUMPTIVE CONDITIONS LIST",
20 THAT HAVE A HIGH RISK OF ABOVE-AVERAGE HEALTH CARE COSTS FOR
21 TREATMENT OF THE CONDITIONS. AN INDIVIDUAL WHO HAS, OR HAS A
22 HISTORY OF HAVING, A MEDICAL CONDITION ON THE PRESUMPTIVE
23 CONDITIONS LIST IS PRESUMED ELIGIBLE TO PARTICIPATE IN THE PROGRAM.

24 **10-22.5-105. Waiver for state innovation - high-risk pool -**
25 **reinsurance program.** (1) THE COMMISSIONER MAY APPLY TO THE
26 UNITED STATES SECRETARY OF HEALTH AND HUMAN SERVICES UNDER
27 SECTION 1332 OF THE FEDERAL ACT FOR A WAIVER OF APPLICABLE

1 PROVISIONS OF THE FEDERAL ACT WITH RESPECT TO HEALTH INSURANCE
2 COVERAGE IN THE STATE FOR A PLAN YEAR BEGINNING ON OR AFTER
3 JANUARY 1, 2018. THE COMMISSIONER SHALL DEVELOP A WAIVER
4 PROPOSAL TO ADDRESS HEALTH CARE COVERAGE FOR HIGH-RISK
5 INDIVIDUALS AND INCREASING PREMIUMS, WHICH MAY INCLUDE
6 IMPLEMENTING THE PROGRAM DEVELOPED PURSUANT TO SECTION
7 10-22.5-104.

8 (2) THE COMMISSIONER MAY IMPLEMENT A STATE PLAN MEETING
9 THE WAIVER REQUIREMENTS IN A MANNER CONSISTENT WITH STATE AND
10 FEDERAL LAW AND AS APPROVED BY THE UNITED STATES SECRETARY OF
11 HEALTH AND HUMAN SERVICES.

12 **10-22.5-106. Gifts, grants, and donations - authority to accept**
13 **and expend.** THE COMMISSIONER MAY SEEK, ACCEPT, AND EXPEND GIFTS,
14 GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES TO DEFRAY
15 THE COSTS OF DEVELOPING THE PROGRAM PURSUANT TO SECTION
16 10-22.5-104, APPLYING FOR A WAIVER PURSUANT TO SECTION
17 10-22.5-105, IMPLEMENTING AND ADMINISTERING THE PROGRAM, AND
18 ANY OTHER COSTS RELATED TO IMPLEMENTING AND ADMINISTERING THIS
19 ARTICLE 22.5.

20 **SECTION 2. Act subject to petition - effective date.** This act
21 takes effect at 12:01 a.m. on the day following the expiration of the
22 ninety-day period after final adjournment of the general assembly (August
23 9, 2017, if adjournment sine die is on May 10, 2017); except that, if a
24 referendum petition is filed pursuant to section 1 (3) of article V of the
25 state constitution against this act or an item, section, or part of this act
26 within such period, then the act, item, section, or part will not take effect
27 unless approved by the people at the general election to be held in

- 1 November 2018 and, in such case, will take effect on the date of the
- 2 official declaration of the vote thereon by the governor.