

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

PREAMENDED

*This Unofficial Version Includes Committee
Amendments Not Yet Adopted on Second Reading*

LLS NO. 21-0583.01 Shelby Ross x4510

SENATE BILL 21-016

SENATE SPONSORSHIP

Pettersen and Moreno,

HOUSE SPONSORSHIP

Esgar and Mullica,

Senate Committees

Health & Human Services
Appropriations

House Committees

A BILL FOR AN ACT

101 **CONCERNING SERVICES RELATED TO PREVENTIVE HEALTH CARE, AND,**
102 **IN CONNECTION THEREWITH, REQUIRING COVERAGE FOR**
103 **CERTAIN PREVENTIVE MEASURES, SCREENINGS, AND**
104 **TREATMENTS THAT ARE ADMINISTERED, DISPENSED, OR**
105 **PRESCRIBED BY HEALTH CARE PROVIDERS AND FACILITIES AND**
106 **MAKING AN APPROPRIATION.**

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 codifies a number of preventive health care services

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

currently required to be covered by health insurance carriers pursuant to the federal "Patient Protection and Affordable Care Act" and adds them to the current list of services required to be covered by Colorado health insurance carriers, which services are not subject to policy deductibles, copayments, or coinsurance. The bill expands certain preventive health care services to include osteoporosis screening; urinary incontinence screening; and counseling, prevention, screening, and treatment of a sexually transmitted infection (STI).

Current law requires a health care provider or facility to perform a diagnostic exam for an STI and subsequently treat the STI at the request of a minor patient. The bill allows a health care provider to administer, dispense, or prescribe preventive measures or medications where applicable. 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.

Current law requires the executive director of the department of health care policy and financing to authorize reimbursement for medical or diagnostic services provided by a certified family planning clinic. The bill removes the requirement that services be provided by a certified family planning clinic and authorizes reimbursement for family planning services and family-planning-related services provided by any licensed health care provider.

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

2 **SECTION 1.** In Colorado Revised Statutes, 10-16-104, **amend**
3 (18)(a)(I) introductory portion, (18)(a)(III)(A), (18)(b) introductory
4 portion, (18)(b)(I), (18)(b)(IX), and (18)(b)(X); and **add** (18)(b)(XI),
5 (18)(b)(XII), (18)(b)(XIII), (18)(b)(XIV), (18)(b)(XV), (18)(b)(XVI),
6 (18)(b)(XVII), (18)(b)(XVIII), (18)(b)(XIX), (18)(b)(XX), (18)(b)(XXI),
7 (18)(b)(XXII), (18)(b)(XXIII), (18)(b)(XXIV), (18)(b)(XXV),
8 (18)(b)(XXVI), (18)(b)(XXVII), (18)(b)(XXVIII), (18)(b)(XXIX),
9 (18)(b)(XXX), (18)(b)(XXXI), (18)(b)(XXXII), (18)(b)(XXXIII),
10 (18)(c)(III.7), (18)(f), (18)(g), and (18.1) as follows:

11 **10-16-104. Mandatory coverage provisions - rules -**
12 **definitions. (18) Preventive health care services. (a) (I) The following**

1 policies and contracts that are delivered, issued, renewed, or reinstated on
2 or after January 1, 2010, must provide coverage for the total cost of the
3 preventive health care services specified in ~~paragraph (b) of this~~
4 ~~subsection (18)~~ SUBSECTION (18)(b) OF THIS SECTION:

5 (III) (A) Except as provided in ~~sub-subparagraph (B) of this~~
6 ~~subparagraph (H)~~ SUBSECTION (18)(a)(III)(B) OR (18)(b)(XX) OF THIS
7 SECTION, coverage required by this subsection (18) is not subject to policy
8 deductibles, copayments, or coinsurance.

9 (b) The coverage required by this subsection (18) must include
10 preventive health care services for the following, in accordance with the
11 A or B recommendations of the task force OR THE HEALTH RESOURCES
12 AND SERVICES ADMINISTRATION GUIDELINES for the particular preventive
13 health care service:

14 (I) ~~Unhealthy~~ Alcohol use screening AND COUNSELING for adults,
15 depression screening for adolescents and adults, and perinatal maternal
16 counseling for persons at risk. The services specified in this section may
17 be provided by a primary care provider; behavioral health care provider,
18 as defined in section 25-1.5-502 (1.3); or mental health professional
19 licensed or certified pursuant to article 245 of title 12.

20 (IX) Tobacco use screening of adults and tobacco cessation
21 interventions by primary care providers, ~~and~~ INCLUDING EXPANDED
22 TOBACCO INTERVENTION AND COUNSELING FOR PREGNANT TOBACCO
23 USERS;

24 (X) (A) ~~Any other preventive services included in the A or B~~
25 ~~recommendation of the task force or required by federal law.~~

26 (B) ~~This subparagraph (X) does not apply to grandfathered health~~
27 ~~benefit plans.~~ ABDOMINAL AORTIC ANEURYSM SCREENING;

- 1 (XI) ASPIRIN-PREVENTIVE MEDICATION;
- 2 (XII) BLOOD PRESSURE SCREENING;
- 3 (XIII) DIABETES SCREENING FOR ADULTS AND GESTATIONAL
4 DIABETES MELLITUS SCREENING;
- 5 (XIV) HEALTHY DIET AND PHYSICAL ACTIVITY COUNSELING TO
6 PREVENT CARDIOVASCULAR DISEASE;
- 7 (XV) FALLS PREVENTION FOR ADULTS SIXTY-FIVE YEARS OF AGE
8 OR OLDER WHO LIVE IN A COMMUNITY SETTING;
- 9 (XVI) HEPATITIS B AND HEPATITIS C SCREENING;
- 10 (XVII) HUMAN IMMUNODEFICIENCY VIRUS SCREENING;
- 11 (XVIII) LUNG CANCER SCREENING;
- 12 (XIX) OBESITY SCREENING AND COUNSELING;
- 13 (XX) COUNSELING, PREVENTION, SCREENING, AND TREATMENT OF
14 A SEXUALLY TRANSMITTED INFECTION, AS DEFINED IN SECTION 25-4-402
15 (10); EXCEPT THAT THE COVERAGE UNDER THIS SUBSECTION (18)(b)(XX)
16 MUST BE PROVIDED TO ALL COVERED PERSONS REGARDLESS OF THE
17 COVERED PERSON'S GENDER. TREATMENT MUST INCLUDE ANTIBIOTICS,
18 ANTIVIRAL AND ANTIRETROVIRAL MEDICATIONS, AND PROCEDURES THAT
19 REDUCE INFECTIVITY. TREATMENT FOR COMPLICATIONS SECONDARY TO
20 THE SEXUALLY TRANSMITTED INFECTION MAY BE SUBJECT TO
21 DEDUCTIBLES, COPAYMENT, OR COINSURANCE.
- 22 (XXI) STATIN PREVENTIVE MEDICATION FOR ADULTS;
- 23 (XXII) TUBERCULOSIS SCREENING;
- 24 (XXIII) ANEMIA SCREENING ON A ROUTINE BASIS;
- 25 (XXIV) COMPREHENSIVE BREASTFEEDING SUPPORT AND
26 COUNSELING FROM TRAINED PROVIDERS AND ACCESS TO BREASTFEEDING
27 SUPPLIES FOR PREGNANT AND NURSING INDIVIDUALS;

1 (XXV) FOLIC ACID SUPPLEMENTS FOR INDIVIDUALS WHO MAY
2 BECOME PREGNANT;

3 (XXVI) SCREENING AND TREATMENT FOR PREECLAMPSIA IN
4 PREGNANT INDIVIDUALS, INCLUDING SCREENING FOR PREECLAMPSIA IN
5 PREGNANT WOMEN WITH BLOOD PRESSURE MEASUREMENTS THROUGHOUT
6 PREGNANCY AND LOW-DOSE ASPIRIN AS PREVENTIVE MEDICATION AFTER
7 TWELVE WEEKS GESTATION IN WOMEN WHO ARE AT HIGH RISK FOR
8 PREECLAMPSIA;

9 (XXVII) RH INCOMPATIBILITY SCREENING FOR ALL PREGNANT
10 INDIVIDUALS AND FOLLOW-UP TESTING FOR INDIVIDUALS AT HIGHER RISK
11 FOR RH INCOMPATIBILITY;

12 (XXVIII) URINARY TRACT, YEAST, OR OTHER INFECTION
13 SCREENING;

14 (XXIX) DOMESTIC AND INTERPERSONAL VIOLENCE SCREENING
15 AND COUNSELING;

16 (XXX) OSTEOPOROSIS SCREENING FOR ALL ADULTS SIXTY YEARS
17 OF AGE OR OLDER;

18 (XXXI) YEARLY URINARY INCONTINENCE SCREENING;

19 ==
20 (XXXII) FAMILY PLANNING SERVICES AND
21 FAMILY-PLANNING-RELATED SERVICES, AS DESCRIBED IN SECTION
22 25.5-4-412 (2); AND

23 (XXXIII) ANY OTHER PREVENTIVE SERVICES INCLUDED IN THE A
24 OR B RECOMMENDATIONS OF THE TASK FORCE OR THE HEALTH RESOURCES
25 AND SERVICES ADMINISTRATION GUIDELINES OR REQUIRED BY FEDERAL
26 LAW.

27 (c) For purposes of this subsection (18):

1 (III.7) "HEALTH RESOURCES AND SERVICES ADMINISTRATION"
2 MEANS THE HEALTH RESOURCES AND SERVICES ADMINISTRATION IN THE
3 FEDERAL DEPARTMENT OF HEALTH AND HUMAN SERVICES.

4 (f) SUBSECTIONS (18)(b)(X) TO (18)(b)(XXXIII) OF THIS SECTION
5 DO NOT APPLY TO GRANDFATHERED HEALTH BENEFIT PLANS.

6 (g) THE COVERAGE REQUIRED BY THIS SUBSECTION (18) MUST, AT
7 A MINIMUM, INCLUDE PREVENTIVE HEALTH SERVICES IDENTIFIED BY THE
8 TASK FORCE OR THE HEALTH RESOURCES AND SERVICES ADMINISTRATION
9 AS OF MARCH 1, 2021.

10 (18.1) Contraception. (a) POLICIES OR CONTRACTS DESCRIBED
11 IN SUBSECTION (18)(a)(I) OF THIS SECTION ISSUED OR RENEWED IN THIS
12 STATE MUST PROVIDE COVERAGE FOR THE TOTAL COST OF ALL
13 CONTRACEPTION, AS DEFINED IN SECTION 2-4-401 (1.5).

14 (b) THE COVERAGE REQUIRED BY THIS SUBSECTION (18.1) IS NOT
15 SUBJECT TO POLICY DEDUCTIBLES, COPAYMENTS, OR COINSURANCE.

16 (c) THIS SUBSECTION (18.1) DOES NOT APPLY TO GRANDFATHERED
17 HEALTH BENEFIT PLANS.

18 **SECTION 2.** In Colorado Revised Statutes, 25-4-409, **amend**
19 (1)(a) and (2) as follows:

20 **25-4-409. Minors - treatment - consent.** (1) (a) A health care
21 provider or facility, if consulted by a patient who is a minor, shall
22 perform, at the minor's request, a diagnostic examination for a sexually
23 transmitted infection. The health care provider or facility shall treat the
24 minor for a sexually transmitted infection, if necessary; discuss,
25 ~~prevention~~ ADMINISTER, DISPENSE, OR PRESCRIBE PREVENTIVE measures
26 OR MEDICATIONS, where applicable; and include appropriate therapies and
27 prescriptions.

1 (2) The consent of a parent or legal guardian is not a prerequisite
2 for a minor to receive a consultation, examination, PREVENTIVE CARE, or
3 treatment for sexually transmitted infections. For the purposes of this
4 section, health care provided to a minor is confidential, and information
5 related to that care must not be divulged to any person other than the
6 minor; except that the reporting required pursuant to the "Child Protection
7 Act of 1987", part 3 of article 3 of title 19, ~~C.R.S.~~, still applies. If the
8 minor is thirteen years of age or younger, the health care provider may
9 involve the minor's parent or legal guardian. A health care provider shall
10 counsel the minor on the importance of bringing ~~his or her~~ THE MINOR'S
11 parent or legal guardian into the minor's confidence regarding the
12 consultation, exam, or treatment.

13 **SECTION 3.** In Colorado Revised Statutes, **amend** 25.5-4-412
14 as follows:

15 **25.5-4-412. Family planning services - family-planning-related**
16 **services - rules - definitions.** (1) When ~~medical or diagnostic~~ FAMILY
17 PLANNING services OR FAMILY-PLANNING-RELATED SERVICES are provided
18 in accordance with this ~~article~~ ARTICLE 4 and articles 5 and 6 of this ~~title~~
19 ~~by a certified family planning clinic~~ TITLE 25.5, the executive director of
20 the state department shall authorize reimbursement for the services, ~~The~~
21 ~~reimbursement shall be made directly to the certified family planning~~
22 ~~clinic~~ SUBJECT TO SECTION 50 OF ARTICLE V OF THE STATE CONSTITUTION.
23 THE STATE DEPARTMENT, ANY INTERMEDIARY, OR ANY MANAGED CARE
24 ORGANIZATION SHALL REIMBURSE THE PROVIDER OF THOSE SERVICES.
25 FAMILY PLANNING SERVICES AND FAMILY-PLANNING-RELATED SERVICES
26 ARE NOT SUBJECT TO POLICY DEDUCTIBLES, COPAYMENTS, OR
27 COINSURANCE.

1 (2) ~~For purposes of AS USED IN this section, "certified family~~
2 ~~planning clinic" means a family planning clinic certified by the Colorado~~
3 ~~department of public health and environment, accredited by a national~~
4 ~~family planning organization, and staffed by medical professionals~~
5 ~~licensed to practice in the state of Colorado, including, but not limited to,~~
6 ~~doctors of medicine, doctors of osteopathy, physician assistants, and~~
7 ~~advanced practice nurses.~~ UNLESS THE CONTEXT OTHERWISE REQUIRES:

8 (a) "FAMILY-PLANNING-RELATED SERVICES" MEANS ANY
9 MEDICALLY NECESSARY HEALTH CARE, COUNSELING SERVICES, OR
10 MEDICATION FOCUSED ON, OR RELATED TO, THE TREATMENT OF MEDICAL
11 CONDITIONS ROUTINELY DIAGNOSED DURING A FAMILY PLANNING VISIT;
12 TREATMENT FOR A URINARY TRACT INFECTION; TESTING, DIAGNOSIS,
13 TREATMENT, AND PREVENTION OF SEXUALLY TRANSMITTED INFECTIONS
14 OR OTHER INFECTIONS OR CONDITIONS OF THE UROGENITAL SYSTEM; AND
15 TREATMENT OF MEDICAL COMPLICATIONS RESULTING FROM A FAMILY
16 PLANNING VISIT.

17 (b) "FAMILY PLANNING SERVICES" MEANS ANY HEALTH CARE OR
18 COUNSELING SERVICES FOCUSED ON PREVENTING, DELAYING, OR
19 PLANNING FOR A PREGNANCY, WHICH MUST INCLUDE MEDICALLY
20 NECESSARY EVALUATION OR PREVENTIVE SERVICES.

21 (3) ~~For purposes of this section, all medical care services or goods~~
22 ~~rendered by a certified family planning clinic that are benefits of the~~
23 ~~Colorado medical assistance program. shall be ordered by a physician~~
24 ~~who need not be physically present on the premises of the certified family~~
25 ~~planning clinic at the time services are rendered.~~

26 (4) ~~Nothing in this section shall be construed as expanding the~~
27 ~~provision of services available as a part of the medical assistance program~~

1 established pursuant to this article and articles 5 and 6 of this title. For
2 purposes of making payments to certified family planning clinics pursuant
3 to this section PROVIDERS, the state board shall establish rules
4 implementing this section. The rules promulgated pursuant to this
5 subsection (4) shall ensure that the reimbursement for services rendered
6 by a certified family planning clinic pursuant to this section shall not be
7 the sole result of an increase in the costs to the state medical assistance
8 program.

9 (5) ANY RECIPIENT MAY OBTAIN FAMILY PLANNING SERVICES OR
10 FAMILY-PLANNING-RELATED SERVICES FROM ANY LICENSED HEALTH CARE
11 PROVIDER, INCLUDING BUT NOT LIMITED TO A DOCTOR OF MEDICINE,
12 DOCTOR OF OSTEOPATHY, PHYSICIAN ASSISTANT, OR ADVANCED PRACTICE
13 NURSE, WHO PROVIDES SUCH SERVICES. THE ENROLLMENT OF A RECIPIENT
14 IN A MANAGED CARE ORGANIZATION, OR A SIMILAR ENTITY, DOES NOT
15 RESTRICT A RECIPIENT'S CHOICE OF THE LICENSED PROVIDER FROM WHOM
16 THE RECIPIENT MAY RECEIVE THOSE SERVICES.

17 **SECTION 4. Appropriation.** (1) For the 2021-22 state fiscal
18 year, \$90,547 is appropriated to the department of health care policy and
19 financing. This appropriation is from the general fund. To implement this
20 act, the department may use this appropriation for the Medicaid
21 management information system maintenance and projects.

22 (2) For the 2021-22 state fiscal year, the general assembly
23 anticipates that the department of health care policy and financing will
24 receive \$814,920 in federal funds for the Medicaid management
25 information system maintenance and projects to implement this act. The
26 appropriation in subsection (1) of this section is based on the assumption
27 that the department will receive this amount of federal funds, which is

1 subject to the "(I)" notation as defined in the annual general appropriation
2 act for the same fiscal year.

3 (3) For the 2021-22 state fiscal year, \$13,353 is appropriated to
4 the department of regulatory agencies for use by the division of insurance.
5 This appropriation is from the division of insurance cash fund created in
6 section 10-1-103 (3), C.R.S., and is based on an assumption that the
7 division will require an additional 0.2 FTE. To implement this act, the
8 division may use this appropriation for personal services.

9 **SECTION 5. Applicability.** Section 1 of this act applies to health
10 benefit plans issued or renewed on or after January 1, 2023.

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