

HB1002_L.001

HOUSE COMMITTEE OF REFERENCE AMENDMENT

Committee on Health & Human Services.

HB26-1002 be amended as follows:

1 Amend printed bill, strike everything below the enacting clause and
2 substitute:

3 "SECTION 1. In Colorado Revised Statutes, 10-16-704, add
4 (15.5) as follows:

5 **10-16-704. Network adequacy - required disclosures - balance**
6 **billing - rules - legislative declaration - definitions.**

7 (15.5) (a) BEGINNING JANUARY 1, 2027, AT LEAST ONCE EVERY
8 TWELVE MONTHS, A CARRIER SHALL CONFIRM THE NETWORK
9 PARTICIPATION OF A MENTAL HEALTH PROVIDER OR A SUBSTANCE USE
10 DISORDER PROVIDER, AS THE TERMS ARE DEFINED IN SECTION 10-16-705.7,
11 WHO HAS NOT SUBMITTED A CLAIM IN THE PRECEDING TWELVE MONTHS OR
12 HAS OTHERWISE COMMUNICATED WITH THE CARRIER IN A MANNER
13 EVIDENCING THE PROVIDER'S INTENT TO CONTINUE PARTICIPATING IN THE
14 CARRIER'S NETWORK AND FOR WHOM NO CHANGE IN PROVIDER STATUS IS
15 REPORTED BY A CENTRALIZED NATIONAL PROVIDER DATABASE THAT
16 COLLECTS, STANDARDIZES, AND MAINTAINS PROVIDER CREDENTIALING
17 AND PRACTICE INFORMATION.

18 (b) THE CARRIER SHALL CONTACT THE PROVIDER, OR THE
19 PROVIDER'S DESIGNATED NOTICE CONTACT IDENTIFIED IN THE PROVIDER'S
20 CONTRACT AGREEMENT WITH THE CARRIER, BY MAIL OR THE ELECTRONIC
21 MEANS THAT THE CARRIER TRADITIONALLY USES TO COMMUNICATE WITH
22 PROVIDERS IN THE CARRIER'S PROVIDER NETWORK TO CONFIRM THE
23 PROVIDER'S INTENT TO CONTINUE PARTICIPATING IN THE CARRIER'S
24 PROVIDER NETWORK AND TO INQUIRE WHETHER THE PROVIDER IS
25 ACCEPTING NEW PATIENTS. IF, BASED ON THE PROVIDER'S FEEDBACK, THE
26 PROVIDER'S INFORMATION NEEDS TO BE UPDATED IN THE CARRIER'S
27 PROVIDER NETWORK DIRECTORIES, THE CARRIER MUST UPDATE ITS
28 CARRIER'S PROVIDER NETWORK DIRECTORIES, AS NECESSARY, WITHIN FIVE
29 BUSINESS DAYS AFTER CONTACTING THE PROVIDER.

30 (c) IF THE PROVIDER FAILS TO RESPOND TO A CARRIER'S INQUIRY
31 WITHIN THIRTY DAYS AFTER THE CARRIER CONTACTS OR ATTEMPTS TO
32 CONTACT THE PROVIDER OR THE PROVIDER'S DESIGNATED NOTICE
33 CONTACT IDENTIFIED IN THE PROVIDER'S CONTRACT AGREEMENT WITH THE
34 CARRIER, THE CARRIER SHALL MAIL A FOLLOW-UP REQUEST TO THE
35 PROVIDER BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED, OR THE
36 ELECTRONIC MEANS THAT THE CARRIER TRADITIONALLY USES TO
37 COMMUNICATE WITH PROVIDERS IN THE CARRIER'S PROVIDER NETWORK.
38 IF THE PROVIDER FAILS TO RESPOND TO THE CARRIER'S FOLLOW-UP
39 REQUEST WITHIN THIRTY DAYS AFTER RECEIPT OF THE REQUEST, THE
40 CARRIER MUST REMOVE THE PROVIDER FROM ITS CARRIER PROVIDER

1 NETWORK AND UPDATE ITS CARRIER'S PROVIDER NETWORK DIRECTORIES,
2 AS NECESSARY, WITHIN FIVE BUSINESS DAYS AFTER THE EXPIRATION OF
3 THE THIRTY-DAY PERIOD.

4 **SECTION 2.** In Colorado Revised Statutes, 10-16-705.7, **amend**
5 (1)(a), (1)(b), (1)(d), (1)(j), (2)(c), (5), (6) introductory portion, (6)(b),
6 (8)(a) introductory portion, (8)(a)(II), (8)(b), (8)(c), (9), (9.5), and (10);
7 and **add** (1)(g.5), (1)(g.9), (1)(h.2), (1)(i.5), (1)(k), and (9.7) as follows:

8 **10-16-705.7. Timely credentialing of providers by carriers -**
9 **notice of receipt required - notice of incomplete applications required**
10 **- delegated credentialing agreements - discrepancies - denials of**
11 **claims prohibited - disclosures - recredentialing - enforcement - rules**
12 **- definitions.**

13 (1) As used in this section, unless the context otherwise requires:

14 (a) "Applicant" means a physician, MENTAL HEALTH PROVIDER, OR
15 SUBSTANCE USE DISORDER PROVIDER who submits an application to a
16 carrier to become a participating ~~physician~~ PROVIDER in the carrier's
17 PROVIDER network.

18 (b) "Application" means an applicant's application to become
19 credentialed by a carrier as a participating ~~physician~~ PROVIDER in at least
20 one of the carrier's provider networks.

21 (d) "Credentialing" or "credential" means the process by which a
22 carrier or its designee collects information concerning an applicant;
23 assesses whether the applicant satisfies the relevant licensing, education,
24 and training requirements to become a participating ~~physician~~ PROVIDER;
25 verifies the assessment; and approves or disapproves the applicant's
26 application.

27 (g.5) "MENTAL HEALTH PROVIDER" MEANS A MENTAL HEALTH
28 ENTITY LICENSED PURSUANT TO ARTICLE 1.5 OF TITLE 25 OR MENTAL
29 HEALTH PROFESSIONAL LICENSED OR CERTIFIED PURSUANT TO ARTICLE 245
30 OF TITLE 12, EXCEPT FOR UNLICENSED PSYCHOTHERAPISTS REGULATED
31 PURSUANT TO ARTICLE 245 OF TITLE 12.

32 (g.9) "PARTICIPATING MENTAL HEALTH PROVIDER OR SUBSTANCE
33 USE DISORDER PROVIDER" MEANS A MENTAL HEALTH PROVIDER OR
34 SUBSTANCE USE DISORDER PROVIDER WHO IS CREDENTIALLED BY A CARRIER
35 OR ITS DESIGNEE TO PROVIDE HEALTH-CARE ITEMS OR SERVICES TO
36 COVERED PERSONS IN AT LEAST ONE OF THE CARRIER'S PROVIDER
37 NETWORKS.

38 (h.2) "PARTICIPATING PROVIDER" MEANS A PARTICIPATING
39 PHYSICIAN OR A PARTICIPATING MENTAL HEALTH PROVIDER OR
40 SUBSTANCE USE DISORDER PROVIDER.

41 (i.5) "PRE-LICENSED PROVIDER" MEANS A "REGISTRANT" AS
42 DEFINED IN SECTION 12-245-202.

43 (j) "Recredentialing" or "recredential" means the process by which

1 a carrier or its designee confirms that a participating ~~physician~~ PROVIDER
2 is in good standing and continues to satisfy the carrier's requirements for
3 participating ~~physicians~~ PROVIDERS.

4 (k) "SUBSTANCE USE DISORDER PROVIDER" MEANS A MENTAL
5 HEALTH ENTITY LICENSED PURSUANT TO ARTICLE 1.5 OF TITLE 25 THAT
6 SPECIALIZES IN TREATING SUBSTANCE USE DISORDERS OR A MENTAL
7 HEALTH PROFESSIONAL LICENSED OR CERTIFIED PURSUANT TO ARTICLE 245
8 OF TITLE 12 WHO SPECIALIZES IN TREATING SUBSTANCE USE DISORDERS,
9 EXCEPT FOR UNLICENSED PSYCHOTHERAPISTS REGULATED PURSUANT TO
10 ARTICLE 245 OF TITLE 12.

11 (2) (c) If a carrier receives a completed application but fails to
12 provide the applicant a receipt in written or electronic form within seven
13 calendar days after receiving the COMPLETED application, as required by
14 subsection (2)(a) of this section, the carrier shall consider the applicant
15 a participating ~~physician~~ PROVIDER, effective no later than fifty-three
16 calendar days following the carrier's receipt of the application.

17 (5) A carrier shall correct discrepancies in its provider or network
18 directory within thirty calendar days after receiving a report of the
19 discrepancy from a THE participating ~~physician~~ PROVIDER. A participating
20 ~~physician~~ PROVIDER shall notify a carrier BY MAIL OR THE ELECTRONIC
21 MEANS THAT THE CARRIER TRADITIONALLY USES TO COMMUNICATE WITH
22 THE PROVIDERS IN THE CARRIER'S PROVIDER NETWORK of any change in
23 the ~~physician's~~ PROVIDER'S name, address, telephone number, business
24 structure, or tax identification number within fifteen business days after
25 making the change.

26 (6) A carrier ~~may~~ SHALL not deny a claim for a medically
27 necessary covered service provided to a covered person if the service:

28 (b) Is provided by a participating ~~physician~~ PROVIDER who is in
29 the CARRIER'S provider network for ~~the carrier's health coverage plan~~ and
30 has concluded the carrier's credentialing process.

31 (8) (a) A carrier or its designee may recredential a participating
32 ~~physician~~ PROVIDER if ~~such~~ recredentialing is:

33 (II) Permitted by the carrier's contract with the participating
34 ~~physician~~ PROVIDER.

35 (b) A carrier shall not require a participating ~~physician~~ PROVIDER
36 to submit an application or participate in a contracting process in order to
37 be recredentialled.

38 (c) ~~Nothing in~~ This subsection (8) ~~affects~~ DOES NOT AFFECT the
39 contract termination rights of a carrier or a participating ~~physician~~
40 PROVIDER.

41 (9) Except as described in subsection (8) of this section and as
42 may be provided in a contract between a carrier and a participating
43 ~~physician~~ PROVIDER, a carrier shall allow a participating ~~physician~~

1 PROVIDER to remain credentialed and include the participating ~~physician~~
2 PROVIDER in the carrier's ~~health coverage plan~~ provider network unless
3 the carrier discovers information indicating that the participating
4 ~~physician~~ PROVIDER no longer satisfies the carrier's guidelines for
5 participation, in which case the carrier shall satisfy the requirements
6 described in section 10-16-705 (5) before terminating the participating
7 ~~physician's~~ PROVIDER'S participation in the CARRIER'S provider network.

8 (9.5) A carrier shall not refuse to credential an applicant or
9 terminate a participating ~~physician's~~ PROVIDER'S participation in a
10 CARRIER'S provider network based solely on the applicant's or
11 participating ~~physician's~~ PROVIDER'S provision of, or assistance in the
12 provision of, a legally protected health-care activity, as defined in section
13 12-30-121 (1)(d), in this state, so long as the care provided did not violate
14 Colorado law.

15 (9.7) (a) A CARRIER SHALL REIMBURSE A PARTICIPATING MENTAL
16 HEALTH PROVIDER OR SUBSTANCE USE DISORDER PROVIDER FOR COVERED
17 SERVICES FURNISHED BY A PRE-LICENSED PROVIDER WHO IS UNDER THE
18 SUPERVISION OF THE PARTICIPATING MENTAL HEALTH PROVIDER OR
19 SUBSTANCE USE DISORDER PROVIDER WHO HAS SATISFIED ALL REQUIRED
20 SUPERVISION RULES AND CRITERIA.

21 (b) (I) A CARRIER SHALL REIMBURSE A PRE-LICENSED PROVIDER
22 FOR PROVIDING COVERED MEDICALLY NECESSARY TREATMENT, AS
23 DEFINED IN SECTION 10-16-104, TO A COVERED PERSON UNDER THE
24 SUPERVISION OF A PARTICIPATING MENTAL HEALTH PROVIDER OR
25 SUBSTANCE USE DISORDER PROVIDER IN ACCORDANCE WITH THE TERMS OF
26 COVERAGE APPLICABLE TO THE PARTICIPATING MENTAL HEALTH PROVIDER
27 OR SUBSTANCE USE DISORDER PROVIDER UNDER A HEALTH BENEFIT PLAN.

28 (II) IF A HEALTH BENEFIT PLAN OFFERS OUT-OF-NETWORK
29 BENEFITS, THE CARRIER MUST REIMBURSE THE COVERED PERSON FOR
30 COVERED MEDICALLY NECESSARY TREATMENT, AS DEFINED IN SECTION
31 10-16-104, THAT IS PROVIDED BY AN OUT-OF-NETWORK PRE-LICENSED
32 PROVIDER UNDER THE SUPERVISION OF A NONPARTICIPATING MENTAL
33 HEALTH PROVIDER OR SUBSTANCE USE DISORDER PROVIDER IN
34 ACCORDANCE WITH THE TERMS OF COVERAGE APPLICABLE TO
35 NONPARTICIPATING PROVIDERS UNDER THE HEALTH BENEFIT PLAN AS
36 LONG AS THE SUPERVISING PROVIDER SUBMITS DOCUMENTATION
37 EVIDENCING THE SUPERVISION.

38 (10) The commissioner shall enforce this section and may
39 ~~promulgate such~~ ADOPT rules as are necessary for the implementation of
40 TO IMPLEMENT this section. Upon receiving more than one complaint
41 from an applicant or a participating ~~physician~~ PROVIDER alleging a
42 violation of this section by a carrier, the commissioner shall investigate
43 the complaints. A carrier that fails to comply with this section or with any

1 rules adopted pursuant to this section is subject to ~~such~~ civil penalties as
2 THAT the commissioner may order pursuant to section 10-1-310.

3 **SECTION 3.** In Colorado Revised Statutes, 12-245-404, **amend**
4 (2)(c) as follows:

5 **12-245-404. Qualifications - examination - licensure and**
6 **registration - rules.**

7 (2) The board shall license as a licensed clinical social worker a
8 person who files an application, in a form and manner required by the
9 board, submits the fee required by the board pursuant to section
10 12-245-205, and submits evidence satisfactory to the board that the
11 applicant:

12 (c) Has practiced social work for at least two years under the
13 virtual or in-person supervision of a licensed clinical social worker or
14 other person with equivalent experience as determined by the board,
15 which practice includes training and work experience in the area of
16 clinical social work practice AND INCLUDES AT LEAST THREE THOUSAND
17 HOURS OF PRACTICE; and

18 **SECTION 4. Act subject to petition - effective date.** This act
19 takes effect at 12:01 a.m. on the day following the expiration of the
20 ninety-day period after final adjournment of the general assembly (August
21 12, 2026, if adjournment sine die is on May 13, 2026); except that, if a
22 referendum petition is filed pursuant to section 1 (3) of article V of the
23 state constitution against this act or an item, section, or part of this act
24 within such period, then the act, item, section, or part will not take effect
25 unless approved by the people at the general election to be held in
26 November 2026 and, in such case, will take effect on the date of the
27 official declaration of the vote thereon by the governor."

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