

**Second Regular Session
Seventy-fifth General Assembly
STATE OF COLORADO**

ENGROSSED

*This Version Includes All Amendments Adopted
on Second Reading in the House of Introduction*

LLS NO. 26-0390.01 Chelsea Princell x4335

HOUSE BILL 26-1235

HOUSE SPONSORSHIP

Feret,

SENATE SPONSORSHIP

Daugherty,

House Committees
Health & Human Services

Senate Committees

A BILL FOR AN ACT

101 **CONCERNING UPDATES TO THE MEDICAL ASSISTANCE PROGRAM.**

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>.)

Beginning December 1, 2026, the bill requires each transportation broker that administers nonemergency medical transportation to medicaid members to submit certain information to the state department regarding transportation providers that the transportation broker contracts with. The department of health care policy and financing (state department) is required to include this information in its annual "SMART Act" presentation.

The bill requires the medical services board to adopt rules to

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.

HOUSE
Amended 2nd Reading
April 13, 2026

implement the federal community engagement requirements.

Under current law, the state department is required to reimburse an opioid treatment program for administering medication-assisted treatment in a jail setting. The bill amends this requirement to require the state department to reimburse a licensed provider who is licensed and authorized to prescribe, dispense, compound, or administer medication-assisted treatment in a jail setting.

The bill prohibits the state department from implementing a multiple procedure payment reduction, compound billing methodology, or substantially similar reimbursement policy for outpatient therapy services.

Beginning January 1, 2027, the bill requires home- and community-based service agencies to submit their medical loss ratio to the state department. The state department is required to publish this medical loss ratio data on the state department's website on an annual basis.

The bill repeals the state medical assistance and services advisory council.

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

2 **SECTION 1.** In Colorado Revised Statutes, **add** 25.5-1-803 as
3 follows:

4 **25.5-1-803. Transportation provider data reporting**
5 **requirements.**

6 (1) ON OR BEFORE DECEMBER 1, 2026, AND ON OR BEFORE EACH
7 DECEMBER 1 THEREAFTER, EACH TRANSPORTATION BROKER SHALL
8 REPORT THE FOLLOWING INFORMATION TO THE STATE DEPARTMENT:

9 (a) REGARDING EACH TRANSPORTATION PROVIDER THAT THE
10 TRANSPORTATION BROKER CONTRACTS WITH:

11 (I) THE TOTAL NUMBER OF RIDES REQUESTED;

12 (II) THE TOTAL NUMBER OF RIDES COMPLETED;

13 (III) THE TOTAL NUMBER OF RIDES CANCELED BY MEMBERS AND
14 THE TRANSPORTATION PROVIDER;

15 (IV) THE TOTAL COST OF RIDES COMPLETED CATEGORIZED BY

1 PROCEDURE CODE; AND

2 (V) THE TOTAL NUMBER OF CALLS RECEIVED FROM MEMBERS
3 REQUESTING NONEMERGENCY MEDICAL TRANSPORTATION AND THE
4 AVERAGE TIME A MEMBER SPENT ON HOLD;

5 (b) THE NUMBER OF GRIEVANCES SUBMITTED BY MEMBERS
6 REGARDING A TRANSPORTATION PROVIDER THAT WERE SUBSTANTIATED,
7 AND THE TRANSPORTATION PROVIDER THAT THE GRIEVANCE CONCERNS;
8 AND

9 (c) THE TOTAL NUMBER OF TRANSPORTATION PROVIDERS
10 TERMINATED FROM THE TRANSPORTATION BROKER'S NETWORK, ON A
11 CORRECTIVE ACTION PLAN, OR ON A PERFORMANCE IMPROVEMENT PLAN.

12 (2) BEGINNING JANUARY 1, 2027, THE STATE DEPARTMENT SHALL
13 INCLUDE AS PART OF THE STATE DEPARTMENT'S "SMART ACT"
14 PRESENTATION REQUIRED BY SECTION 2-7-203 THE INFORMATION
15 SUBMITTED TO THE STATE DEPARTMENT BY THE TRANSPORTATION
16 BROKERS AS REQUIRED BY SUBSECTION (1) OF THIS SECTION.

17 **SECTION 2.** In Colorado Revised Statutes, 25.5-4-103, **amend**
18 (20) as follows:

19 **25.5-4-103. Definitions.**

20 As used in this article 4 and articles 5 and 6 of this title 25.5,
21 unless the context otherwise requires:

22 (20) "~~Qualified alien~~" shall have "QUALIFIED NONCITIZEN" HAS the
23 meaning ascribed to that term in section 431 (b) of the federal "Personal
24 Responsibility and Work Opportunity Reconciliation Act of 1996", Public
25 Law 104-193, as amended.

26 **SECTION 3.** In Colorado Revised Statutes, **add** 25.5-4-217 as
27 follows:

1 **25.5-4-217. Multiple procedure payment reductions for**
2 **outpatient therapy - prohibition - definitions.**

3 (1) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE
4 REQUIRES:

5 ■ ■

6 (a) "MULTIPLE PROCEDURE PAYMENT REDUCTION" MEANS A
7 REIMBURSEMENT METHODOLOGY THAT REDUCES PAYMENT FOR ONE OR
8 MORE DIFFERENT SERVICES FURNISHED TO A MEMBER DURING THE SAME
9 DATE OF SERVICE, ENCOUNTER, OR EPISODE OF CARE BASED SOLELY ON
10 THE NUMBER, SEQUENCING, OR COMBINATION OF DIFFERENT SERVICES
11 PERFORMED.

12 (b) "OUTPATIENT THERAPY SERVICES" MEANS PROFESSIONAL
13 SERVICES PROVIDED BY AN OCCUPATIONAL THERAPIST, PHYSICAL
14 THERAPIST, OR SPEECH LANGUAGE PATHOLOGIST IN A SETTING OTHER
15 THAN A HOSPITAL.

16 (2) IF THE STATE DEPARTMENT PLANS TO IMPLEMENT, APPLY, OR
17 ENFORCE A NEW MULTIPLE PROCEDURE PAYMENT REDUCTION FOR
18 OUTPATIENT THERAPY SERVICES PROVIDED UNDER THE MEDICAL
19 ASSISTANCE PROGRAM, THE STATE DEPARTMENT MUST PROVIDE NOTICE TO
20 THE IMPACTED PROVIDERS OF THE FORTHCOMING CHANGE AT LEAST SIX
21 MONTHS PRIOR TO IMPLEMENTING THE CHANGE TO ENSURE ADEQUATE
22 TIME FOR PROVIDERS TO PREPARE AND HOLD AT LEAST ONE STAKEHOLDER
23 MEETING TO DISCUSS THE IMPLEMENTATION, APPLICATION, AND
24 ENFORCEMENT OF THE NEW MULTIPLE PROCEDURE PAYMENT REDUCTION
25 FOR OUTPATIENT THERAPY SERVICES. THE STAKEHOLDER PROCESS MUST
26 INCLUDE A DISCUSSION REGARDING THE METRICS THE STATE DEPARTMENT
27 PLANS TO USE IN IMPLEMENTING THE CHANGES.

1 **SECTION 4.** In Colorado Revised Statutes, **add** 25.5-4-218 as
2 follows:

3 **25.5-4-218. Community engagement requirements for**
4 **medicaid eligibility - notice to revisor of statutes - rules - reporting -**
5 **repeal.**

6 (1) ON OR BEFORE JANUARY 1, 2027, THE STATE BOARD SHALL
7 ADOPT RULES THAT ARE NECESSARY TO IMPLEMENT THE COMMUNITY
8 ENGAGEMENT REQUIREMENTS OF TITLE XIX OF THE FEDERAL "SOCIAL
9 SECURITY ACT OF 1965", 42 U.S.C. SEC. 1396a(xx), AS AMENDED OR
10 RELOCATED, IN A MANNER THAT ENSURES ALL APPLICANTS AND MEMBERS
11 CAN OBTAIN OR MAINTAIN COVERAGE WITH THE LEAST AMOUNT OF
12 ADMINISTRATIVE BURDENS.

13 (2) THE STATE BOARD'S AUTHORITY TO ADOPT RULES PURSUANT
14 TO SUBSECTION (1) OF THIS SECTION IS REPEALED IF THE COMMUNITY
15 ENGAGEMENT REQUIREMENTS OF TITLE XIX OF THE FEDERAL "SOCIAL
16 SECURITY ACT OF 1965", 42 U.S.C. SEC. 1396a(xx), AS AMENDED OR
17 RELOCATED, ARE REPEALED.

18 (3) THE STATE BOARD SHALL NOTIFY THE REVISOR OF STATUTES
19 IN WRITING OF THE DATE WHEN THE CONDITION SPECIFIED IN SUBSECTION
20 (2) OF THIS SECTION HAS OCCURRED BY EMAILING THE NOTICE TO
21 REVISOROFSTATUTES.GA@COLEG.GOV. THIS SECTION IS REPEALED,
22 EFFECTIVE UPON THE DATE IDENTIFIED IN THE NOTICE, OR IF THE NOTICE
23 DOES NOT SPECIFY THAT DATE, UPON THE DATE OF THE NOTICE TO THE
24 REVISOR OF STATUTES.

25 (4) (a) BEGINNING MARCH 1, 2027, AND EACH MONTH
26 THEREAFTER, THE STATE DEPARTMENT SHALL MAKE THE FOLLOWING DATA
27 CONCERNING ENROLLMENT IN THE MEDICAL ASSISTANCE PROGRAM

1 AVAILABLE ON THE STATE DEPARTMENT'S WEBSITE:

2 (I) THE NUMBER OF APPLICATIONS FOR MEDICAL ASSISTANCE THAT
3 WERE APPROVED AND DENIED;

4 (II) THE NUMBER OF RENEWAL APPLICATIONS FOR MEDICAL
5 ASSISTANCE THAT WERE APPROVED AND DENIED;

6 (III) THE NUMBER OF MEMBERS WHOSE MEDICAL ASSISTANCE
7 ELIGIBILITY WAS RENEWED USING EXISTING DATA AND RECORDS WITHOUT
8 REQUIRING THE MEMBER TO SUBMIT ADDITIONAL INFORMATION;

9 (IV) THE RATE OF REENROLLMENT IN THE MEDICAL ASSISTANCE
10 PROGRAM WITHIN NINETY DAYS AFTER A MEMBER'S RENEWAL
11 APPLICATION FOR MEDICAL ASSISTANCE WAS DENIED; AND

12 (V) OTHER DATA THE STATE DEPARTMENT DETERMINES IS
13 NECESSARY TO SHARE WITH THE PUBLIC AND ANY OTHER DATA THAT MAY
14 BE FEDERALLY REQUIRED TO COMPLY WITH THE COMMUNITY
15 ENGAGEMENT REQUIREMENTS OF TITLE XIX OF THE FEDERAL "SOCIAL
16 SECURITY ACT OF 1965", 42 U.S.C. SEC. 1396a (xx), AS AMENDED OR
17 RELOCATED.

18 (b) THE PURPOSE OF THE REPORTING REQUIREMENT SET FORTH IN
19 THIS SUBSECTION (4) IS TO DEMONSTRATE THE IMPACTS OF THE
20 COMMUNITY ENGAGEMENT REQUIREMENTS OF TITLE XIX OF THE FEDERAL
21 "SOCIAL SECURITY ACT OF 1965", 42 U.S.C. SEC. 1396a (xx), AS
22 AMENDED OR RELOCATED, ON ELIGIBILITY AND ENROLLMENT IN THE
23 MEDICAL ASSISTANCE PROGRAM.

24 (c) THE STATE DEPARTMENT'S DUTY TO POST DATA ON THE STATE
25 DEPARTMENT'S WEBSITE PURSUANT TO THIS SUBSECTION (4) IS REPEALED
26 IF THE COMMUNITY ENGAGEMENT REQUIREMENTS OF TITLE XIX OF THE
27 FEDERAL "SOCIAL SECURITY ACT OF 1965", 42 U.S.C. SEC. 1396a (xx), AS

1 AMENDED OR RELOCATED, ARE REPEALED.

2 (d) THE EXECUTIVE DIRECTOR OF THE STATE DEPARTMENT SHALL
3 NOTIFY THE REVISOR OF STATUTES IN WRITING OF THE DATE WHEN THE
4 CONDITION SPECIFIED IN SUBSECTION (4)(c) OF THIS SECTION HAS
5 OCCURRED BY EMAILING THE NOTICE TO
6 REVISOROFSTATUTES.GA@COLEG.GOV. THIS SECTION (4) IS REPEALED
7 EFFECTIVE UPON THE DATE IDENTIFIED IN THE NOTICE, OR IF THE NOTICE
8 DOES NOT SPECIFY THAT DATE, UPON THE DATE OF THE NOTICE TO THE
9 REVISOR OF STATUTES.

10 SECTION 5. In Colorado Revised Statutes, 25.5-4-401.5, amend
11 (1)(c)(I) as follows:

12 25.5-4-401.5. Review of provider rates - advisory committee
13 - recommendations - repeal.

14 (1) (c) (I) The state department may propose to exclude rates from
15 the schedule established pursuant to subsection (1)(a) of this section if
16 those rates are adjusted OR REVIEWED on a periodic basis as a result of
17 other state statute or federal law or regulation. The state department shall
18 include the proposed list of exclusions with the schedule established
19 pursuant to subsection (1)(a) of this section.

20 SECTION 6. In Colorado Revised Statutes, 25.5-4-505.5, amend
21 (5) as follows:

22 25.5-4-505.5. Federal authorization related to persons involved
23 in the criminal justice system - report - rules - legislative declaration.

24 (5) (a) The state department shall ~~only reimburse an opioid~~
25 ~~treatment program, as defined in section 27-80-203, for administering~~
26 ~~medication-assisted treatment~~ REIMBURSE A PROVIDER WHO IS LICENSED
27 AND AUTHORIZED TO PRESCRIBE, DISPENSE, COMPOUND, OR ADMINISTER

1 MEDICATION-ASSISTED TREATMENT in a jail setting. ~~At a minimum, an~~
2 ~~opioid treatment program that administers medication-assisted treatment~~
3 ~~shall:~~

4 ~~(I) Employ a physician medical director;~~

5 ~~(II) Ensure the individual receiving medication-assisted treatment~~
6 ~~undergoes a minimum observation period after receiving~~
7 ~~medication-assisted treatment as determined by behavioral health~~
8 ~~administration rule pursuant to section 27-80-204; and~~

9 ~~(III) Meet all critical incident reporting requirements as~~
10 ~~determined by behavioral health administration rule pursuant to section~~
11 ~~27-80-204.~~

12 (b) The state department shall ensure as part of the state
13 department's quality oversight that ~~opioid treatment programs that~~
14 LICENSED PROVIDERS WHO administer medication-assisted treatment in a
15 jail setting maintain emergency policies and procedures that address
16 adverse outcomes.

17 **SECTION 7.** In Colorado Revised Statutes, 25.5-5-101, **repeal**
18 **(2); and add (1)(n) and (1)(o) as follows:**

19 **25.5-5-101. Mandatory provisions - eligible groups - rules.**

20 (1) In order to participate in the medicaid program, the federal
21 government requires the state to provide medical assistance to certain
22 eligible groups. Pursuant to federal law and except as provided in
23 subsection (2) of this section, any person who is eligible for medical
24 assistance under the mandated groups specified in this section must
25 receive both the mandatory services that are specified in sections
26 25.5-5-102 and 25.5-5-103 and the optional services that are specified in
27 sections 25.5-5-202 and 25.5-5-203. Subject to the availability of federal

1 financial participation, the following are the individuals or groups that are
2 mandated under federal law to receive benefits under this article 5 and
3 articles 4 and 6 of this title 25.5:

4 (n) A QUALIFIED NONCITIZEN WHO ENTERED THE UNITED STATES
5 BEFORE AUGUST 22, 1996, SHALL RECEIVE BENEFITS UNDER THIS ARTICLE
6 5 AND ARTICLES 4 AND 6 OF THIS TITLE 25.5;

7 (o) A QUALIFIED NONCITIZEN WHO ENTERED THE UNITED STATES
8 ON OR AFTER AUGUST 22, 1996, IS NOT ELIGIBLE FOR BENEFITS UNDER THIS
9 ARTICLE 5 OR ARTICLE 4 OR 6 OF THIS TITLE 25.5 FOR FIVE YEARS AFTER
10 THE DATE OF ENTRY IN THE UNITED STATES; EXCEPT THAT THE STATE
11 DEPARTMENT MAY PROVIDE BENEFITS UNDER THIS ARTICLE 5 AND
12 ARTICLES 4 AND 6 OF THIS TITLE 25.5 TO A PREGNANT PERSON WHO IS A
13 QUALIFIED ALIEN NONCITIZEN AND A CHILD UNDER NINETEEN YEARS OLD
14 WHO IS A QUALIFIED NONCITIZEN, SO LONG AS THE PREGNANT PERSON OR
15 CHILD MEETS ELIGIBILITY CRITERIA OTHER THAN CITIZENSHIP. COVERAGE
16 OF INDIVIDUALS IN THIS GROUP IS SUBJECT TO THE RECEIPT OF FEDERAL
17 FINANCIAL PARTICIPATION, UNLESS STATE FUNDS ARE SPECIFICALLY
18 APPROPRIATED FOR COVERAGE OF GROUPS FOR WHOM FEDERAL FINANCIAL
19 PARTICIPATION IS UNAVAILABLE.

20 ~~(2) (a) A qualified alien who entered the United States before~~
21 ~~August 22, 1996, who meets the exceptions described in the federal~~
22 ~~"Personal Responsibility and Work Opportunity Reconciliation Act of~~
23 ~~1996", Public Law 104-193, as amended, shall receive benefits under this~~
24 ~~article and articles 4 and 6 of this title.~~

25 (b) ~~(I) A qualified alien who entered the United States on or after~~
26 ~~August 22, 1996, shall not be eligible for benefits under this article or~~
27 ~~article 4 or 6 of this title, except as provided in section 25.5-5-103 (3), for~~

1 ~~five years after the date of entry into the United States unless he or she~~
2 ~~meets the exceptions described in the federal "Personal Responsibility~~
3 ~~and Work Opportunity Reconciliation Act of 1996", Public Law 104-193,~~
4 ~~as amended.~~

5 ~~(H) Notwithstanding the five-year waiting period established in~~
6 ~~subparagraph (I) of this paragraph (b), but subject to the availability of~~
7 ~~sufficient appropriations and the receipt of federal financial participation,~~
8 ~~the state department may provide benefits under this article and articles~~
9 ~~4 and 6 of this title to a pregnant woman who is a qualified alien and a~~
10 ~~child under nineteen years of age who is a qualified alien so long as such~~
11 ~~woman or child meets eligibility criteria other than citizenship.~~

12 **SECTION 8.** In Colorado Revised Statutes, 25.5-5-201, **amend**
13 **(1)(j) and (1)(k); and repeal (2) as follows:**

14 **25.5-5-201. Optional provisions - optional groups - rules.**

15 (1) The federal government allows the state to select optional
16 groups to receive medical assistance. Pursuant to federal law, any person
17 who is eligible for medical assistance under the optional groups specified
18 in this section must receive both the mandatory services specified in
19 sections 25.5-5-102 and 25.5-5-103 and the optional services specified in
20 sections 25.5-5-202 and 25.5-5-203. Subject to the availability of federal
21 financial aid funds, the following are the individuals or groups that
22 Colorado has selected as optional groups to receive medical assistance
23 pursuant to this article 5 and articles 4 and 6 of this title 25.5:

24 (j) Individuals who are qualified ~~aliens~~ NONCITIZENS and were or
25 would have been eligible for supplemental security income as a result of
26 a disability but are not eligible for such supplemental security income as
27 a result of the passage of the federal "Personal Responsibility and Work

1 Opportunity Reconciliation Act of 1996", Public Law 104-193;

2 (k) Other qualified ~~aliens~~ NONCITIZENS who entered or were
3 present in the United States before August 22, 1996;

4 (2) (a) ~~A qualified alien, who entered the United States on or after~~
5 ~~August 22, 1996, shall not be eligible for benefits under this article and~~
6 ~~articles 4 and 6 of this title, except as provided in section 25.5-5-103 (3),~~
7 ~~for five years after the date of entry into the United States unless he or she~~
8 ~~meets the exceptions described in the federal "Personal Responsibility~~
9 ~~and Work Opportunity Reconciliation Act of 1996", Public Law 104-193,~~
10 ~~as amended. After five years, such qualified alien shall be eligible for~~
11 ~~benefits under this article and articles 4 and 6 of this title but shall have~~
12 ~~sponsor income and resources deemed to the individual or family under~~
13 ~~rules established by the state board of human services pursuant to section~~
14 ~~26-2-137, C.R.S.~~

15 (b) ~~Notwithstanding the five-year waiting period established in~~
16 ~~paragraph (a) of this subsection (2), but subject to the availability of~~
17 ~~sufficient appropriations and the receipt of federal financial participation,~~
18 ~~the state department may provide benefits under this article and articles~~
19 ~~4 and 6 of this title to a pregnant woman who is a qualified alien and a~~
20 ~~child under nineteen years of age who is a qualified alien so long as such~~
21 ~~woman or child meets eligibility criteria other than citizenship.~~

22 **SECTION 9.** In Colorado Revised Statutes, **add 25.5-6-120** as
23 follows:

24 **25.5-6-120. Home- and community-based service provider**
25 **agencies - disclosure of direct care service cost ratio to administrative**
26 **cost ratio - definition.**

27 (1) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE

1 REQUIRES, "DIRECT CARE SERVICE COST TO ADMINISTRATIVE COST RATIO"
2 MEANS THE PERCENTAGE OF MEDICAID SERVICES REVENUE THAT A HOME-
3 AND COMMUNITY-BASED SERVICE PROVIDER AGENCY THAT RENDERS BASE
4 WAGE QUALIFYING SERVICES SPENDS ON DIRECT CARE WORKFORCE
5 COMPENSATION AND DIRECT CARE SERVICE RELATED TRAINING AND
6 SUPPORTS AS COMPARED TO ADMINISTRATIVE AND GENERAL EXPENSES.

7 (2) (a) THE STATE DEPARTMENT SHALL COLLECT THE FOLLOWING
8 INFORMATION FROM EACH HOME- AND COMMUNITY-BASED SERVICE
9 PROVIDER AGENCY THAT SERVES MORE THAN THIRTY MEMBERS AND IS
10 SUBJECT TO THE BASE WAGE REQUIREMENTS SET BY THE STATE
11 DEPARTMENT IN RULE, AND MAY COLLECT THE FOLLOWING INFORMATION
12 FROM A HOME- AND COMMUNITY-BASED SERVICE PROVIDER AGENCY THAT
13 SERVES THIRTY OR FEWER MEMBERS:

14 (I) THE TOTAL MEDICAL ASSISTANCE PROGRAM REIMBURSEMENT
15 AND VOLUME DATA FOR HOME- AND COMMUNITY-BASED SERVICES THAT
16 ARE SUBJECT TO THE BASE WAGE REQUIREMENTS, SORTED BY SERVICE
17 CODES AND SUBMITTED SEPARATELY FOR EMPLOYEES AND INDEPENDENT
18 CONTRACTORS;

19 (II) DIRECT WAGES AND CASH COMPENSATION, WHICH ARE LIMITED
20 TO WAGES, OVERTIME PAY, BONUSES, AND OTHER DIRECT MONETARY
21 COMPENSATION PAID TO DIRECT CARE WORKERS;

22 (III) PAID LEAVE AND EMPLOYEE BENEFITS, WHICH ARE LIMITED TO
23 PAID LEAVE, HEALTH INSURANCE, RETIREMENT CONTRIBUTIONS, AND
24 OTHER INSURANCE BENEFITS, WELLNESS SUPPORT, TRANSPORTATION
25 BENEFITS, AND OTHER MONETARY OR NON-MONETARY EMPLOYMENT
26 BENEFITS;

27 (IV) EMPLOYER PAYROLL TAXES AND STATUTORY EMPLOYMENT

1 COSTS, WHICH ARE LIMITED TO EMPLOYER PAYROLL TAXES, STATE
2 UNEMPLOYMENT INSURANCE CONTRIBUTIONS, AND FEDERAL
3 UNEMPLOYMENT INSURANCE CONTRIBUTIONS;

4 (V) WORKFORCE RECRUITMENT, RETENTION, AND INCENTIVE
5 SUPPORTS, WHICH ARE LIMITED TO STIPENDS, REIMBURSEMENTS,
6 ALLOWANCES, INCENTIVE PROGRAMS, AND OTHER BENEFITS DESIGNED TO
7 RECRUIT, RETAIN AND SUPPORT THE WELL-BEING OF DIRECT CARE
8 WORKERS;

9 (VI) WORKFORCE SUPERVISION, TRAINING AND OPERATIONAL
10 SUPPORT, WHICH ARE LIMITED TO COSTS RELATED TO SUPERVISING DIRECT
11 CARE WORKERS, PROVIDING TRAINING, AND MAINTAINING WORKFORCE
12 SUPPORT SERVICES NECESSARY FOR SAFE SERVICE DELIVERY AND
13 REGULATORY COMPLIANCE;

14 (VII) OPERATIONAL AND COMPLIANCE COSTS TIED TO
15 EMPLOYMENT OF DIRECT CARE WORKERS, WHICH ARE LIMITED TO
16 EMPLOYER EXPENSES NECESSARY TO RECRUIT, EMPLOY, SUPERVISE,
17 SUPPORT, AND RETAIN DIRECT CARE WORKERS, INCLUDING OPERATIONAL
18 COSTS REQUIRED TO SAFELY DELIVER MEDICAL ASSISTANCE SERVICES AND
19 COMPLY WITH MEDICAL ASSISTANCE PROGRAM REQUIREMENTS; AND

20 (VIII) EXISTING BASE WAGE REPORTING AND ATTESTATION
21 DOCUMENTATION VERIFYING THAT DIRECT CARE WORKER WAGES MEET
22 THE STATE BASE WAGE REQUIREMENTS.

23 (b) A HOME- AND COMMUNITY-BASED SERVICE PROVIDER AGENCY
24 SHALL SUBMIT TO THE STATE DEPARTMENT ITS DIRECT CARE SERVICE COST
25 TO ADMINISTRATIVE COST RATIO AND THE INFORMATION REQUIRED
26 PURSUANT TO THIS SUBSECTION (2) NO LATER THAN SEPTEMBER 30, 2027.

27 (3) THE STATE DEPARTMENT SHALL SUBMIT A REPORT DETAILING

1 THE INFORMATION COLLECTED PURSUANT TO SUBSECTION (2) OF THIS
2 SECTION TO THE HOUSE OF REPRESENTATIVES AND SENATE HEALTH AND
3 HUMAN SERVICES COMMITTEES AND THE JOINT BUDGET COMMITTEE, OR
4 ANY SUCCESSOR COMMITTEES, NO LATER THAN DECEMBER 31, 2027.

5 (4) THE DATA COLLECTED AND PUBLISHED PURSUANT TO THIS
6 SECTION MUST BE USED SOLELY FOR LEGISLATIVE INFORMATIONAL
7 PURPOSES AND IS NOT SUBJECT TO DISCLOSURE UNDER THE "COLORADO
8 OPEN RECORDS ACT," PART 2 OF ARTICLE 72 OF TITLE 24.

9 **SECTION 10.** In Colorado Revised Statutes, **repeal** 25.5-4-203.

10 **SECTION 11. Act subject to petition - effective date.** This act
11 takes effect at 12:01 a.m. on the day following the expiration of the
12 ninety-day period after final adjournment of the general assembly (August
13 12, 2026, if adjournment sine die is on May 13, 2026); except that, if a
14 referendum petition is filed pursuant to section 1 (3) of article V of the
15 state constitution against this act or an item, section, or part of this act
16 within such period, then the act, item, section, or part will not take effect
17 unless approved by the people at the general election to be held in
18 November 2026 and, in such case, will take effect on the date of the
19 official declaration of the vote thereon by the governor.