

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

**REREVISED**

*This Version Includes All Amendments  
Adopted in the Second House*

LLS NO. 26-0027.01 Shelby Ross x4510

**SENATE BILL 26-006**

**SENATE SPONSORSHIP**

**Amabile and Kirkmeyer**, Bright, Catlin, Coleman, Cutter, Frizell, Pelton B., Wallace

**HOUSE SPONSORSHIP**

**Brown and Taggart**, Bacon, Boesenecker, Duran, McCormick, Sirota, Smith

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**Senate Committees**

Health & Human Services  
Appropriations

**House Committees**

Health & Human Services  
Appropriations

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**A BILL FOR AN ACT**

101      **CONCERNING PARITY FOR THE USE OF NON-OPIOID PAIN MANAGEMENT**  
102              **DRUGS, AND, IN CONNECTION THEREWITH, MAKING AN**  
103              **APPROPRIATION.**

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**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 requires a health insurance carrier that provides prescription drug benefits to require that:

- The utilization review requirements, including prior authorization and step therapy, for a non-opioid drug prescribed and approved by the federal food and drug

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 3rd Reading  
May 6, 2026

HOUSE  
Amended 2nd Reading  
May 5, 2026

SENATE  
3rd Reading Unamended  
April 20, 2026

SENATE  
Amended 2nd Reading  
April 17, 2026

administration (FDA) for the treatment or management of chronic or acute pain (non-opioid pain management drug) are no more restrictive than the least restrictive utilization review requirements for opioid drugs prescribed for the treatment or management of chronic or acute pain;

- There is at least one clinically appropriate non-opioid prescription drug available as an alternative for each opioid prescription drug; and
- The cost-sharing, copayment, or deductible for a non-opioid pain management drug is not greater than the cost-sharing, copayment, or deductible for an opioid drug prescribed for the treatment or management of chronic or acute pain.

The bill requires the department of health care policy and financing to ensure that the utilization review requirements, including prior authorization or step therapy, for a non-opioid prescription drug prescribed and approved by the FDA for the treatment or management of chronic or acute pain are no more restrictive than the least restrictive utilization requirements for opioid drugs prescribed for the treatment or management of chronic or acute pain.

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

2 **SECTION 1.** In Colorado Revised Statutes, 10-16-145.5, **add**  
3 (2.5) as follows:

4 **10-16-145.5. Step therapy - prior authorization - prohibited -**  
5 **stage four advanced metastatic cancer - non-opioid pain management**  
6 **drug - definitions.**

7 (2.5) (a) NOTWITHSTANDING SECTION 10-16-145, A CARRIER THAT  
8 PROVIDES PRESCRIPTION DRUG BENEFITS SHALL REQUIRE THAT:

9 (1) THE UTILIZATION REVIEW REQUIREMENTS, INCLUDING PRIOR  
10 AUTHORIZATION AND STEP THERAPY, FOR A NON-OPIOID DRUG PRESCRIBED  
11 AND APPROVED BY THE FDA FOR THE TREATMENT OR MANAGEMENT OF  
12 CHRONIC OR ACUTE PAIN ARE NO MORE RESTRICTIVE THAN THE LEAST  
13 RESTRICTIVE UTILIZATION REVIEW REQUIREMENTS FOR OPIOID DRUGS  
14 PRESCRIBED FOR THE TREATMENT OR MANAGEMENT OF CHRONIC OR

1 ACUTE PAIN; AND

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3 (II) THE COST-SHARING, COPAYMENT, OR DEDUCTIBLE FOR A  
4 NON-OPIOID DRUG PRESCRIBED FOR THE TREATMENT OR MANAGEMENT OF  
5 CHRONIC OR ACUTE PAIN IS NO GREATER THAN THE COST-SHARING,  
6 COPAYMENT, OR DEDUCTIBLE FOR AN OPIOID DRUG PRESCRIBED FOR THE  
7 TREATMENT OR MANAGEMENT OF CHRONIC OR ACUTE PAIN.

8 (b) (I) EXCEPT AS PROVIDED IN SUBSECTION (2.5)(b)(II) OF THIS  
9 SECTION, ALL INDIVIDUAL AND SMALL GROUP HEALTH BENEFIT PLANS  
10 ISSUED OR RENEWED IN THIS STATE ON OR AFTER JANUARY 1, 2027, SHALL  
11 ENSURE THERE IS AT LEAST ONE NON-OPIOID PRESCRIPTION DRUG  
12 AVAILABLE AS A CLINICALLY APPROPRIATE ALTERNATIVE FOR AN OPIOID  
13 PRESCRIPTION DRUG.

14 (II) SUBSECTION (2.5)(b)(I) OF THIS SECTION IS INOPERATIVE AND  
15 THE STATE SHALL NOT ASSUME AN OBLIGATION FOR THE COVERAGE  
16 REQUIRED PURSUANT TO SUBSECTION (2.5)(b)(I) OF THIS SECTION IF THE  
17 DIVISION DETERMINES THAT THE BENEFIT SPECIFIED IN SUBSECTION  
18 (2.5)(b)(I) OF THIS SECTION REQUIRES STATE DEFRAYAL OF THE COST OF  
19 COVERAGE PURSUANT TO A PROVISION OF THE FEDERAL ACT, INCLUDING  
20 42 U.S.C. SEC. 18031 (d)(3)(B) OR A SUCCESSOR PROVISION, AND THE  
21 IMPLEMENTING REGULATIONS OR THE STATE IS OTHERWISE REQUIRED TO  
22 DEFRAID THE COST OF COVERAGE REQUIRED PURSUANT TO SUBSECTION  
23 (2.5)(b)(I) OF THIS SECTION.

24 (III) ALL LARGE EMPLOYER HEALTH BENEFIT PLANS ISSUED OR  
25 RENEWED IN THIS STATE ON AND AFTER JANUARY 1, 2028, SHALL ENSURE  
26 THERE IS AT LEAST ONE NON-OPIOID PRESCRIPTION DRUG AVAILABLE AS A  
27 CLINICALLY APPROPRIATE ALTERNATIVE FOR AN OPIOID PRESCRIPTION

1 DRUG.

2 (IV) THE COVERAGE REQUIRED BY THIS SUBSECTION (2.5) MAY BE  
3 OFFERED THROUGH A HIGH DEDUCTIBLE PLAN THAT WOULD QUALIFY FOR  
4 A HEALTH SAVINGS ACCOUNT PURSUANT TO 26 U.S.C. SEC. 223; EXCEPT  
5 THAT A CARRIER MAY APPLY DEDUCTIBLE AMOUNTS FOR THE REQUIRED  
6 COVERAGE IF IT IS NOT CONSIDERED BY THE UNITED STATES DEPARTMENT  
7 OF THE TREASURY TO BE PREVENTIVE OR TO HAVE AN ACCEPTABLE  
8 DEDUCTIBLE.

9 (c) THIS SUBSECTION (2.5) DOES NOT APPLY TO A GROUP BENEFIT  
10 PLAN ISSUED PURSUANT TO THE "STATE EMPLOYEE GROUP BENEFITS  
11 ACT", PART 6 OF ARTICLE 50 OF TITLE 24.

12 **SECTION 2. Appropriation.** For the 2026-27 state fiscal year,  
13 \$15,415 is appropriated to the department of regulatory agencies for use  
14 by the division of insurance. This appropriation is from the division of  
15 insurance cash fund created in section 10-1-103 (3)(a)(I), C.R.S., and is  
16 based on an assumption that the division will require an additional 0.2  
17 FTE. To implement this act, the division may use this appropriation for  
18 personal services.

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20 **SECTION 3. 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 12, 2026, if adjournment sine die is on May 13, 2026); 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 2026 and, in such case, will take effect on the date of the
- 2 official declaration of the vote thereon by the governor.