

SENATE COMMITTEE OF REFERENCE REPORT

Chair of Committee

March 23, 2023
Date

Committee on Health & Human Services.

After consideration on the merits, the Committee recommends the following:

SB23-179 be amended as follows, and as so amended, be referred to the Committee on Appropriations with favorable recommendation:

- 1 Amend printed bill, page 2, strike lines 12 through 17.
- 2 Reletter succeeding paragraphs accordingly.
- 3 Page 3, line 7, strike "are already" and substitute "have been".
- 4 Page 3, strike lines 8 through 14 and substitute "insurance for more than
5 10 years;".
- 6 Reletter succeeding paragraphs accordingly.
- 7 Page 3, strike lines 18 through 23.
- 8 Reletter succeeding paragraphs accordingly.
- 9 Page 4, strike lines 10 and 11 and substitute "dental plans".
- 10 Page 6, line 19, strike "SPENDS" and "INCURS".
- 11 Page 6, line 24, strike "EXPENDED" and substitute "INCURRED".
- 12 Page 6, line 26, strike "EXPENDED" and substitute "INCURRED".
- 13 Page 8, after line 1 insert:
14 "(III) REPORTNONPROFIT COMMUNITY BENEFIT EXPENDITURES, AS
15 DEFINED BY RULE OF THE COMMISSIONER, THAT ARE ALIGNED WITH
16 EXCLUSION PARAMETERS AND LIMITS OUTLINED IN 45 CFR 158.162;

- 1 EXCEPT THAT THE COMMISSIONER SHALL ENSURE THAT ONLY
2 EXPENDITURES THAT IMPROVE ACCESS TO DENTAL SERVICES OR ENHANCE
3 DENTAL HEALTH, AND NO OVERHEAD OR ADMINISTRATIVE COSTS, ARE
4 REPORTED UNDER THIS SUBSECTION (3);".
- 5 Renumber succeeding subparagraphs accordingly.
- 6 Page 8, line 3, after "PLAN" insert "COST-SHARING AND".
- 7 Page 8, line 19, after "(d)" insert "(I)" and strike "WITHIN ONE HUNDRED
8 TWENTY DAYS" and substitute "BY JANUARY 1 OF THE YEAR".
- 9 Page 8, line 23, strike "SUBSECTION (3)(a)(II)" substitute "SUBSECTIONS
10 (3)(a)(II) AND (3)(a)(III)".
- 11 Page 8, line 27, strike "(I)" and substitute "(A)".
- 12 Page 9, line 1, strike "(II)" and substitute "(B)".
- 13 Page 9, line 5, strike "DIVISION" and substitute "DIVISION.".
- 14 Page 9, line 6, strike "AND" and substitute:
15 "(II) THE DIVISION".
- 16 Page 9, line 6, after "DATA" insert "IN SUBSECTION (3)(a) OF THIS SECTION,
17 AND, IF AVAILABLE, SUBSECTION (4)(a) OF THIS SECTION,".
- 18 Page 9, line 24, strike "DATA." and substitute "DATA AND CONSIDERATION
19 OF THE IMPACT OF NONPROFIT COMMUNITY BENEFIT EXPENDITURES
20 DESCRIBED IN SUBSECTION (3)(a)(III) OF THIS SECTION ON ANY OUTLIER
21 CALCULATION.".
- 22 Page 10, strike lines 12 through 27.
- 23 Page 11, strike lines 1 through 15 and substitute:
- 24 "SECTION 4. In Colorado Revised Statutes, 10-16-135, **add** (7)
25 as follows:
26 **10-16-135. Health coverage plan information cards - rules -**
27 **standardization - contents.** (7) THE COMMISSIONER SHALL ADOPT RULES
28 THAT REQUIRE EACH CARRIER THAT PROVIDES A DENTAL COVERAGE PLAN,
29 AS DEFINED IN SECTION 10-16-158 (1)(a), TO ISSUE TO COVERED PERSONS
30 TO WHOM A DENTAL COVERAGE PLAN IDENTIFICATION CARD IS ISSUED A

1 STANDARDIZED WRITTEN OR VIRTUAL CARD CONTAINING PLAN
2 INFORMATION. TO THE EXTENT POSSIBLE, THE RULES MUST INCORPORATE
3 AND NOT CONFLICT WITH THE REQUIREMENTS OF SECTION 10-16-124
4 REGARDING PRESCRIPTION INFORMATION CARDS. THE COMMISSIONER
5 SHALL ADOPT RULES BY MARCH 31, 2024, THAT DESCRIBE THE FORMAT OF
6 THE STANDARDIZED CARD TO BE ISSUED BY CARRIERS. THE RULES
7 ESTABLISHING THE FORMAT FOR THE CARD MUST INCLUDE A STANDARD
8 SIZE, MUST REQUIRE THE CARD TO BE LEGIBLE AND PHOTOCOPIED, AND
9 MUST DELINEATE THE INFORMATION TO BE CONTAINED ON THE CARD,
10 INCLUDING THE FOLLOWING, AS APPLICABLE:

11 (a) THE COVERED PERSON'S NAME AND THE APPLICABLE PLAN
12 NUMBER;

13 (b) CONTACT INFORMATION FOR THE CARRIER OR DENTAL
14 COVERAGE PLAN ADMINISTRATOR; AND

15 (c) AN INDICATION OF WHETHER THE DENTAL COVERAGE PLAN IS
16 REGULATED BY THE STATE OF COLORADO."

17 Page 11, line 23, strike "PUBLISH" and substitute "SUBJECT TO AVAILABLE
18 APPROPRIATIONS AND AT THE REQUEST OF THE COMMISSIONER OF
19 INSURANCE, PUBLISH".

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