

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

REVISED

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

LLS NO. 23-0532.03 Brita Darling x2241

SENATE BILL 23-189

SENATE SPONSORSHIP

Moreno and Cutter, Gonzales, Jaquez Lewis, Marchman, Winter F., Buckner, Coleman, Danielson, Fenberg, Fields, Ginal, Hinrichsen, Mullica, Sullivan

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Senate Committees

Health & Human Services
Appropriations

House Committees

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Appropriations

A BILL FOR AN ACT

101 **CONCERNING INCREASING ACCESS TO REPRODUCTIVE HEALTH-CARE**
102 **SERVICES, AND, IN CONNECTION THEREWITH, MAKING AN**
103 **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>.)

Sections 1, 2, 3, and 5 of the bill change the defined term "HIV infection prevention drug", as it appears and is used in several areas of law, to "HIV prevention drug".

Section 2 also:

- Adds the women's preventive services guidelines of the

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
March 31, 2023

SENATE
Amended 3rd Reading
March 22, 2023

SENATE
Amended 2nd Reading
March 21, 2023

health resources and services administration in the United States department of health and human services to the mandatory preventive health-care services coverage for health benefit plans;

- Specifies that the mandatory preventive health-care services benefit for counseling for, prevention of, and screening for sexually transmitted infection includes HIV prevention drugs and the services necessary for initiation and continued use of an HIV prevention drug, as described in the bill, based on the most recent guidelines and clinical guidance;
- Requires large employer plans, on and after January 1, 2025, to provide coverage for the total cost of abortion care without policy deductibles, copayments, or coinsurance. Individual and small group plans must provide this coverage if the federal department of health and human services confirms the state's determination that the coverage is not subject to state defrayal pursuant to federal law. To the extent required by binding federal jurisprudence, employers are exempted from providing coverage if providing coverage conflicts with the employer's sincerely held religious beliefs.

Section 3 also prohibits a health insurance carrier from requiring a covered person to undergo step therapy or to receive prior authorization before a health-care provider may prescribe or dispense a medication for the treatment of HIV.

Section 4 prohibits a carrier from imposing deductibles, copayments, coinsurance, annual or lifetime maximum benefits, or other cost sharing on coverage for:

- The treatment of a sexually transmitted infection; or
- Sterilization services, which coverage must be provided regardless of the covered person's gender.

With the minor's consent, **section 6** allows a health-care provider acting within the scope of the health-care provider's license, certificate, or registration to furnish contraceptive procedures, supplies, or information to the minor without notification to or the consent of the minor's parent or parents, legal guardian, or any other person having custody of or decision-making responsibility for the minor.

Sections 7 and 8 expand the reproductive health-care program administered by the department of health care policy and financing (department) to include additional family planning services and family-planning-related services and allow individuals under 19 years of age to apply for and enroll themselves in the program.

Section 9 requires the department to reimburse licensed health-care providers for family planning services and

family-planning-related services provided to a minor and creates a cash fund from which the general assembly may appropriate money to the department for this purpose. **Section 10** exempts the cash fund from the limit on uncommitted cash fund reserves.

Section 11 requires nonemergency medical transportation services under the state medical assistance program to include expenses for transportation to medical services that are prohibited from coverage pursuant to section 50 of article V of the Colorado constitution.

Section 12 of the bill prohibits the use under the state medical assistance program of utilization management, including prior authorization and step therapy, for prescription drugs prescribed for the treatment or prevention of HIV.

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

2 **SECTION 1.** In Colorado Revised Statutes, 10-16-102, **amend**
3 (38.5) as follows:

4 **10-16-102. Definitions.** As used in this article 16, unless the
5 context otherwise requires:

6 (38.5) "HIV ~~infection~~ prevention drug" means preexposure
7 prophylaxis, post-exposure prophylaxis, or other drugs approved by the
8 FDA for the prevention of HIV infection.

9 **SECTION 2.** In Colorado Revised Statutes, 10-16-104, **amend**
10 (18)(a)(I) introductory portion, (18)(b) introductory portion, (18)(b)(X),
11 (18)(c) introductory portion, and (18)(e)(I); and **add** (18)(b.3),
12 (18)(c)(III.6), (18)(f), and (26) as follows:

13 **10-16-104. Mandatory coverage provisions - definitions -**
14 **rules.** (18) **Preventive health-care services.** (a) (I) The following
15 policies and contracts that are issued or renewed in this state must provide
16 coverage for the total cost of the preventive health-care services specified
17 in subsections (18)(b), **(18)(b.3)**, and (18)(b.7) of this section:

18 (b) The coverage required by this subsection (18) must include
19 ~~preventive health-care services for the following~~ **COVERAGE FOR THE**

1 FOLLOWING PREVENTIVE HEALTH-CARE SERVICES, in accordance with the
2 A or B recommendations of the task force, for the particular preventive
3 health-care service RECOMMENDATIONS ESTABLISHED BY THE ACIP, OR
4 PREVENTIVE CARE AND SCREENING AS PROVIDED FOR IN THE
5 COMPREHENSIVE GUIDELINES, AS APPLICABLE:

6 (X) (A) Any other preventive services included in the A or B
7 recommendation of the task force or required by federal law; ANY OTHER
8 RECOMMENDATIONS ESTABLISHED BY THE ACIP; ANY OTHER PREVENTIVE
9 CARE AND SCREENING, AS PROVIDED FOR IN THE COMPREHENSIVE
10 GUIDELINES.

11 (B) This subparagraph (X) SUBSECTION (18)(b)(X) does not apply
12 to grandfathered health benefit plans.

13 (b.3) FOR HEALTH BENEFIT PLANS ISSUED OR RENEWED ON OR
14 AFTER JANUARY 1, 2025, IF COUNSELING, PREVENTION, AND SCREENING
15 FOR A SEXUALLY TRANSMITTED INFECTION, AS REQUIRED IN SUBSECTION
16 (18)(b)(XI) OF THIS SECTION, ARE COVERED SERVICES, THE HEALTH
17 BENEFIT PLAN MUST PROVIDE THE COVERAGE WITHOUT COST SHARING,
18 REGARDLESS OF THE COVERED PERSON'S GENDER, AND THE COVERAGE
19 MUST INCLUDE, CONSISTENT WITH TASK FORCE REQUIREMENTS, COVERAGE
20 FOR HIV PREVENTION DRUGS AND SERVICES NECESSARY FOR INITIATION
21 AND CONTINUED USE OF HIV PREVENTION DRUGS, INCLUDING OFFICE
22 VISITS, TESTING, VACCINATIONS, AND MONITORING SERVICES.

23 (c) For purposes of AS USED IN this subsection (18):

24 (III.6) "COMPREHENSIVE GUIDELINES" MEANS THE FOLLOWING
25 COMPREHENSIVE GUIDELINES SUPPORTED BY THE HEALTH RESOURCES AND
26 SERVICES ADMINISTRATION IN THE UNITED STATES DEPARTMENT OF
27 HEALTH AND HUMAN SERVICES:

1 (A) PREVENTIVE CARE AND SCREENING FOR WOMEN; AND
2 (B) EVIDENCE-INFORMED PREVENTIVE CARE AND SCREENING FOR
3 INFANTS, CHILDREN, AND ADOLESCENTS.

4 (e) (I) A carrier shall reimburse a pharmacist employed by an
5 in-network pharmacy for prescribing and dispensing HIV ~~infection~~
6 prevention drugs to a covered person. A carrier shall provide a pharmacist
7 who prescribes and dispenses HIV ~~infection~~ prevention drugs to a
8 covered person pursuant to section 12-280-125.7 an adequate consultative
9 fee, or, if medical billing is not available, an enhanced dispensing fee,
10 that is equivalent or that is provided to a physician or advanced practice
11 registered nurse.

12 (f) THE COMMISSIONER MAY PROMULGATE RULES AS NECESSARY
13 TO IMPLEMENT THIS SUBSECTION (18).

14 (26) **Abortion care - rules - definition.** (a) EXCEPT AS PROVIDED
15 IN SUBSECTIONS (26)(d) AND (26)(g) OF THIS SECTION AND SUBJECT TO
16 THE PROVISIONS OF SUBSECTIONS (26)(e) AND (26)(f) OF THIS SECTION,
17 ALL INDIVIDUAL AND [REDACTED] GROUP HEALTH BENEFIT PLANS ISSUED OR
18 RENEWED IN THIS STATE SHALL PROVIDE COVERAGE FOR THE TOTAL COST
19 OF ABORTION CARE.

20 (b) THE COVERAGE REQUIRED PURSUANT TO THIS SUBSECTION (26)
21 IS NOT SUBJECT TO POLICY DEDUCTIBLES, COPAYMENTS, OR COINSURANCE;
22 EXCEPT THAT COPAYMENTS MAY APPLY AS REQUIRED BY A
23 GRANDFATHERED HEALTH BENEFIT PLAN.

24 (c) THE COMMISSIONER SHALL ADOPT RULES CONSISTENT WITH
25 AND AS ARE NECESSARY TO IMPLEMENT THIS SUBSECTION (26).

26 (d) AN EMPLOYER IS NOT OBLIGATED TO PROVIDE THE COVERAGE
27 REQUIRED BY THIS SUBSECTION (26) IF:

1 (I) PROVIDING _____ THE COVERAGE CONFLICTS WITH THE
2 EMPLOYER'S SINCERELY HELD RELIGIOUS BELIEFS; OR

3 (II) THE EMPLOYER IS A PUBLIC ENTITY PROHIBITED BY SECTION 50
4 OF ARTICLE V OF THE STATE CONSTITUTION FROM USING PUBLIC FUNDS TO
5 PAY FOR INDUCED ABORTIONS.

6 (e) THIS SUBSECTION (26) APPLIES TO, AND THE DIVISION SHALL
7 IMPLEMENT THE REQUIREMENTS OF THIS SUBSECTION (26) FOR, LARGE
8 EMPLOYER HEALTH BENEFIT PLANS ISSUED OR RENEWED IN THIS STATE ON
9 OR AFTER JANUARY 1, 2025; EXCEPT THAT COPAYMENTS MAY APPLY AS
10 REQUIRED BY A GRANDFATHERED LARGE EMPLOYER HEALTH BENEFIT
11 PLAN.

12 (f) WITH RESPECT TO INDIVIDUAL AND SMALL GROUP HEALTH
13 BENEFIT PLANS:

14 (I) THE DIVISION SHALL SUBMIT TO THE FEDERAL DEPARTMENT OF
15 HEALTH AND HUMAN SERVICES:

16 (A) THE DIVISION'S DETERMINATION AS TO WHETHER THE BENEFIT
17 SPECIFIED IN THIS SUBSECTION (26) IS IN ADDITION TO ESSENTIAL HEALTH
18 BENEFITS AND WOULD BE SUBJECT TO DEFRAYAL BY THE STATE PURSUANT
19 TO 42 U.S.C. SEC. 18031 (d)(3)(B); AND

20 (B) A REQUEST THAT THE FEDERAL DEPARTMENT OF HEALTH AND
21 HUMAN SERVICES CONFIRM THE DIVISION'S DETERMINATION WITHIN SIXTY
22 DAYS AFTER RECEIPT OF THE DIVISION'S REQUEST FOR CONFIRMATION OF
23 THE DETERMINATION.

24 (II) THIS SUBSECTION (26) APPLIES TO, AND THE DIVISION SHALL
25 IMPLEMENT THE REQUIREMENTS OF THIS SUBSECTION (26) FOR,
26 INDIVIDUAL AND SMALL GROUP HEALTH BENEFIT PLANS ISSUED OR
27 RENEWED IN THIS STATE UPON THE EARLIER OF:

1 (A) TWELVE MONTHS AFTER THE FEDERAL DEPARTMENT OF
2 HEALTH AND HUMAN SERVICES CONFIRMS THAT THE COVERAGE SPECIFIED
3 IN THIS SUBSECTION (26) DOES NOT CONSTITUTE AN ADDITIONAL BENEFIT
4 THAT REQUIRES DEFRAYAL BY THE STATE PURSUANT TO 42 U.S.C. SEC.
5 18031 (d)(3)(B);

6 (B) TWELVE MONTHS AFTER THE FEDERAL DEPARTMENT OF
7 HEALTH AND HUMAN SERVICES OTHERWISE INFORMS THE DIVISION THAT
8 THE COVERAGE IN THIS SUBSECTION (26) DOES NOT REQUIRE STATE
9 DEFRAYAL PURSUANT TO 42 U.S.C. SEC. 18031 (d)(3)(B); OR

10 (C) THE PASSAGE OF MORE THAN THREE HUNDRED SIXTY-FIVE
11 DAYS SINCE THE DIVISION SUBMITTED ITS DETERMINATION AND REQUEST
12 FOR CONFIRMATION PURSUANT TO SUBSECTION (26)(f)(I) OF THIS SECTION,
13 AND THE FEDERAL DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS
14 FAILED TO RESPOND TO THE REQUEST WITHIN THAT PERIOD, IN WHICH CASE
15 THE DIVISION SHALL CONSIDER THE FEDERAL DEPARTMENT'S
16 UNREASONABLE DELAY A PRECLUSION FROM REQUIRING DEFRAYAL BY THE
17 STATE.

18 (g) THE PROVISIONS OF THIS SUBSECTION (26) DO NOT APPLY TO A
19 HIGH DEDUCTIBLE HEALTH BENEFIT PLAN __ PURSUANT TO 26 U.S.C. SEC.
20 223, AS AMENDED, ISSUED OR RENEWED IN THIS STATE UNTIL AN ELIGIBLE
21 INSURED'S DEDUCTIBLE HAS BEEN MET, UNLESS ALLOWED PURSUANT TO
22 FEDERAL LAW.

23 (h) AS USED IN THIS SUBSECTION (26), "ABORTION CARE" HAS THE
24 SAME MEANING AS "ABORTION", AS DEFINED IN SECTION 25-6-402 (1).

25 **SECTION 3.** In Colorado Revised Statutes, **amend** 10-16-152 as
26 follows:

27 **10-16-152. HIV prevention and treatment medication -**

1 **limitations on carriers - step therapy - prior authorization - study -**
2 **repeal.** (1) A carrier shall not require a covered person to undergo step
3 therapy or to receive prior authorization before a pharmacist may,
4 pursuant to section 12-280-125.7, prescribe ~~and~~ OR dispense an HIV
5 infection prevention drug.

6 (2) BEFORE JULY 1, 2027, A CARRIER SHALL NOT REQUIRE A
7 COVERED PERSON TO UNDERGO STEP THERAPY OR TO RECEIVE PRIOR
8 AUTHORIZATION BEFORE A PROVIDER MAY, ACTING WITHIN THE
9 PROVIDER'S SCOPE OF PRACTICE, PRESCRIBE OR DISPENSE ANY DRUG
10 APPROVED BY THE FDA AND USED FOR THE TREATMENT OR PREVENTION
11 OF HIV THAT IS INCLUDED ON THE CARRIER'S PRESCRIPTION DRUG
12 FORMULARY AS OF MARCH 1, 2023.

13 (3) (a) THE DIVISION SHALL CONTRACT WITH ONE OR MORE
14 ENTITIES TO CONDUCT A STUDY THAT INCLUDES QUALITATIVE PATIENT
15 AND PROVIDER EXPERIENCE INFORMATION AND AN ACTUARIAL REVIEW TO
16 CONSIDER THE PREDICTED COST AND HEALTH IMPACTS OF REMOVING THE
17 REQUIREMENT FOR A COVERED PERSON TO UNDERGO STEP THERAPY OR TO
18 RECEIVE PRIOR AUTHORIZATION BEFORE A PROVIDER MAY, ACTING WITHIN
19 THE PROVIDER'S SCOPE OF PRACTICE, PRESCRIBE OR DISPENSE A DRUG FOR
20 THE TREATMENT OF HIV. IN CONDUCTING THE STUDY, THE ENTITY
21 CONTRACTED TO PERFORM THE STUDY MUST CONSULT WITH COMMUNITY
22 ORGANIZATIONS LED BY PEOPLE LIVING WITH HIV. THE DIVISION SHALL
23 PROVIDE THE COMPLETED STUDY TO THE GENERAL ASSEMBLY NO LATER
24 THAN OCTOBER 1, 2026.

25 (b) THIS SUBSECTION (3) IS REPEALED, EFFECTIVE JULY 1, 2027.

26 **SECTION 4.** In Colorado Revised Statutes, **add** 10-16-158 and
27 10-16-159 as follows:

1 **10-16-158. Treatment of sexually transmitted infection - cost**
2 **sharing - rules - definition.** (1) FOR HEALTH BENEFIT PLANS ISSUED OR
3 RENEWED ON OR AFTER JANUARY 1, 2025, IF THE TREATMENT OF A
4 SEXUALLY TRANSMITTED INFECTION, AS DEFINED IN SECTION 25-4-402
5 (10), IS A COVERED SERVICE, THE HEALTH BENEFIT PLAN MUST PROVIDE
6 THE COVERAGE WITHOUT DEDUCTIBLES, COPAYMENTS, COINSURANCE,
7 ANNUAL OR LIFETIME MAXIMUM BENEFIT LIMITS, OR OTHER COST SHARING
8 FOR OR LIMITS ON THE COVERAGE FOR THE TREATMENT OF A SEXUALLY
9 TRANSMITTED INFECTION.

10 (2) THE PROVISIONS OF THIS SECTION DO NOT APPLY TO A HIGH
11 DEDUCTIBLE HEALTH BENEFIT PLAN PURSUANT TO 26 U.S.C. SEC. 223,
12 AS AMENDED, ISSUED OR RENEWED IN THIS STATE UNTIL AN ELIGIBLE
13 INSURED'S DEDUCTIBLE HAS BEEN MET, UNLESS ALLOWED PURSUANT TO
14 FEDERAL LAW.

15 (3) THE COMMISSIONER MAY PROMULGATE RULES TO IMPLEMENT
16 THIS SECTION.

17 (4) AS USED IN THIS SECTION, "TREATMENT" MEANS MEDICALLY
18 NECESSARY CARE FOR THE MANAGEMENT OF THE EXISTING SEXUALLY
19 TRANSMITTED INFECTION.

20 **10-16-159. Coverage for sterilization services - cost sharing.**
21 **(1)** FOR HEALTH BENEFIT PLANS ISSUED OR RENEWED ON OR AFTER
22 JANUARY 1, 2025, IF STERILIZATION SERVICES ARE A COVERED SERVICE,
23 THE HEALTH BENEFIT PLAN MUST PROVIDE THE COVERAGE REGARDLESS OF
24 THE COVERED PERSON'S SEX OR GENDER AND WITHOUT DEDUCTIBLES,
25 COPAYMENTS, COINSURANCE, ANNUAL OR LIFETIME MAXIMUM BENEFIT
26 LIMITS, OR OTHER COST SHARING FOR OR LIMITS ON THE COVERAGE FOR
27 STERILIZATION SERVICES.

1 (2) THE PROVISIONS OF THIS SECTION DO NOT APPLY TO A HIGH
2 DEDUCTIBLE HEALTH BENEFIT PLAN PURSUANT TO 26 U.S.C. SEC. 223,
3 AS AMENDED, ISSUED OR RENEWED IN THIS STATE UNTIL AN ELIGIBLE
4 INSURED'S DEDUCTIBLE HAS BEEN MET, UNLESS ALLOWED PURSUANT TO
5 FEDERAL LAW.

6 **SECTION 5.** In Colorado Revised Statutes, 12-280-125.7,
7 **amend** (1) introductory portion, (1)(c), (2), (3) introductory portion,
8 (5)(a), and (5)(b) as follows:

9 **12-280-125.7. Pharmacists' authority to prescribe and**
10 **dispense HIV prevention drugs - definitions - rules.** (1) As used in this
11 section, UNLESS THE CONTEXT OTHERWISE REQUIRES:

12 (c) "HIV ~~infection~~ prevention drug" means preexposure
13 prophylaxis, post-exposure prophylaxis, or other drugs approved by the
14 FDA for the prevention of HIV infection.

15 (2) A pharmacist may prescribe and dispense HIV ~~infection~~
16 prevention drugs in accordance with a standing order pursuant to section
17 25-1-130 or a statewide drug therapy protocol developed pursuant to
18 subsection (5) of this section.

19 (3) Before prescribing or dispensing HIV ~~infection~~ prevention
20 drugs to a patient, a pharmacist must:

21 (5) (a) On or before six months after July 13, 2020, the state board
22 of pharmacy, the Colorado medical board, and the state board of nursing
23 shall, in collaboration with the department of public health and
24 environment, and as described in section 12-280-601 (1)(b), develop
25 statewide drug therapy protocols for pharmacists to prescribe and
26 dispense HIV ~~infection~~ prevention drugs.

27 (b) If the state board of pharmacy, the Colorado medical board,

1 and the state board of nursing are not able to agree in the time period
2 required by subsection (5)(a) of this section to statewide drug therapy
3 protocols for pharmacists to prescribe and dispense HIV infection
4 prevention drugs, the state board of pharmacy shall collaborate with the
5 department of public health and environment to develop and implement
6 statewide drug therapy protocols by January 1, 2021.

7 **SECTION 6.** In Colorado Revised Statutes, **amend** 13-22-105 as
8 follows:

9 **13-22-105. Minors - consent - contraception.** ~~Birth control~~
10 WITH THE MINOR'S CONSENT, A HEALTH-CARE PROVIDER LICENSED,
11 CERTIFIED, OR REGISTERED PURSUANT TO TITLE 12 WHO IS ACTING WITHIN
12 THE HEALTH-CARE PROVIDER'S SCOPE OF PRACTICE MAY FURNISH
13 CONTRACEPTIVE procedures, supplies, ~~and~~ OR information ~~may be~~
14 ~~furnished by physicians licensed under article 240 of title 12 to any~~ A
15 ~~minor who is pregnant, or a parent, or married, or who has the consent of~~
16 ~~the minor's parent or legal guardian, or who has been referred for such~~
17 ~~services by another physician, a member of the clergy, a family planning~~
18 ~~clinic, a school or institution of higher education, or any agency or~~
19 ~~instrumentality of this state or any subdivision thereof, or who requests~~
20 ~~and is in need of birth control procedures, supplies, or information~~
21 WITHOUT NOTIFICATION TO OR THE CONSENT OF THE MINOR'S PARENT OR
22 PARENTS, LEGAL GUARDIAN, OR ANY OTHER PERSON HAVING CUSTODY OF
23 OR DECISION-MAKING RESPONSIBILITY FOR THE MINOR.

24 **SECTION 7.** In Colorado Revised Statutes, 25.5-2-103, **amend**
25 (2), (6), and (7)(c); **repeal** (1)(a); and **add** (1)(g) and (5.5) as follows:

26 **25.5-2-103. Reproductive health-care program - report - rules**
27 **- definitions.** (1) As used in this section, unless the context otherwise

1 requires:

- 2 (a) ~~"Contraceptive methods and counseling services" means:~~
3 ~~(I) Any FDA-approved contraceptive drug, device, or product;~~
4 ~~(II) Services related to the administration and monitoring of~~
5 ~~FDA-approved contraceptive drugs, devices, and products, including~~
6 ~~management of side effects;~~
7 ~~(III) Counseling services for continued adherence to a prescribed~~
8 ~~regimen;~~
9 ~~(IV) Device insertion and removal; and~~
10 ~~(V) Any other contraceptive methods and counseling services~~
11 ~~identified by the health resources and services administration in the~~
12 ~~United States department of health and human services or the Women's~~
13 ~~Preventive Services Guidelines as of December 17, 2019.~~

14 (g) "REPRODUCTIVE HEALTH-CARE SERVICES" MEANS FAMILY
15 PLANNING SERVICES, AS DEFINED IN SECTION 25.5-4-412 (2)(b), AND
16 FAMILY-PLANNING-RELATED SERVICES, AS DEFINED IN SECTION 25.5-4-412
17 (2)(a).

18 (2) On and after July 1, 2022, the state department shall
19 administer a reproductive health-care program, referred to in this section
20 as the "program", that provides ~~contraceptive methods and counseling~~
21 REPRODUCTIVE HEALTH-CARE services to participants.

22 ==
23 (5.5) TO THE EXTENT PRACTICABLE, THE STATE DEPARTMENT
24 SHALL ENSURE THAT ELIGIBLE INDIVIDUALS SEEKING TO PARTICIPATE IN
25 THE PROGRAM ARE ABLE TO APPLY FOR AND ENROLL IN THE PROGRAM
26 THROUGH THEIR LOCAL COUNTY OFFICE, A STATE MEDICAL ASSISTANCE
27 PROGRAM SITE, AN ONLINE APPLICATION, OR ANY OTHER MECHANISM THAT

1 IS AVAILABLE TO APPLICANTS FOR THE STATE MEDICAL ASSISTANCE
2 PROGRAM.

3 (6) The state department shall provide ~~contraceptive methods and~~
4 ~~counseling~~ REPRODUCTIVE HEALTH-CARE services to participants without
5 imposing any cost-sharing requirements.

6 (7) Beginning in state fiscal year 2023-24, the state department
7 shall analyze and report the cost-effectiveness of the program to the
8 public through the annual hearing, pursuant to the "State Measurement for
9 Accountable, Responsive, and Transparent (SMART) Government Act",
10 part 2 of article 7 of title 2. At a minimum, the report must include:

11 (c) The cost of providing ~~contraceptive methods and counseling~~
12 REPRODUCTIVE HEALTH-CARE services to participants;

13 **SECTION 8.** In Colorado Revised Statutes, 25.5-1-201, **amend**
14 (1) introductory portion and (1)(f.5) as follows:

15 **25.5-1-201. Programs to be administered by the department**
16 **of health care policy and financing.** (1) The ~~department of health care~~
17 ~~policy and financing~~ STATE DEPARTMENT shall administer the following
18 programs and perform the following functions:

19 (f.5) The reproductive health-care program that provides
20 ~~contraceptive methods and counseling~~ REPRODUCTIVE HEALTH-CARE
21 services, as specified in section 25.5-2-103;

22 == == ==

23 **SECTION 9.** In Colorado Revised Statutes, **add** 25.5-5-514 as
24 follows:

25 **25.5-5-514. Prescription drugs used for treatment or**
26 **prevention of HIV - prohibition on utilization management -**
27 **definition.** (1) AS USED IN THIS SECTION, "HIV" MEANS HUMAN

1 IMMUNODEFICIENCY VIRUS.

2 (2) (a) BEFORE JULY 1, 2027, THE STATE DEPARTMENT SHALL NOT
3 RESTRICT BY PRIOR AUTHORIZATION OR STEP THERAPY REQUIREMENTS
4 ANY PRESCRIPTION DRUG APPROVED BY THE FEDERAL FOOD AND DRUG
5 ADMINISTRATION THAT IS USED FOR THE TREATMENT OR PREVENTION OF
6 HIV IF A PRESCRIBING PRACTITIONER LICENSED PURSUANT TO TITLE 12
7 HAS DETERMINED THE PRESCRIPTION DRUG TO BE MEDICALLY NECESSARY
8 FOR THE TREATMENT OR PREVENTION OF HIV FOR A RECIPIENT.
9 PRESCRIPTION DRUGS USED FOR THE TREATMENT OR PREVENTION OF HIV
10 INCLUDE PROTEASE INHIBITORS, NON-NUCLEOSIDE REVERSE
11 TRANSCRIPTASE INHIBITORS, NUCLEOSIDE REVERSE TRANSCRIPTASE
12 INHIBITORS, ANTIVIRALS, INTEGRASE INHIBITORS, LONG ACTING
13 MEDICATIONS, AND FUSION INHIBITORS.

14 (b) NOTHING IN THIS SUBSECTION (2) PREVENTS THE STATE
15 DEPARTMENT FROM PERFORMING DRUG UTILIZATION REVIEW THAT MAY
16 BE NECESSARY FOR PATIENT SAFETY OR FOR ENSURING THE PRESCRIBED
17 USE IS FOR A MEDICALLY ACCEPTED INDICATION, AS REQUIRED BY SECTION
18 1927 OF THE "SOCIAL SECURITY ACT OF 1935".

19 **SECTION 10.** In Colorado Revised Statutes, 25-6-101, **amend**
20 **(1) as follows:**

21 **25-6-101. Legislative declaration. (1) Continuing population**
22 **growth either causes or aggravates many social, economic, and**
23 **environmental problems, both in this state and in the nation EVERY**
24 **INDIVIDUAL HAS A FUNDAMENTAL RIGHT TO MAKE DECISIONS ABOUT THE**
25 **INDIVIDUAL'S REPRODUCTIVE HEALTH CARE INCLUDING THE**
26 **FUNDAMENTAL RIGHT TO USE OR REFUSE CONTRACEPTION.**

27 **SECTION 11.** In Colorado Revised Statutes, **add** 25-6-104 as

1 follows:

2 25-6-104. Department of public health and environment -
3 family planning access collaborative - legislative declaration -
4 recommendations - funding. (1) (a) THE GENERAL ASSEMBLY FINDS AND
5 DECLARES THAT, ACCORDING TO A 2019 REPORT BY THE COLORADO
6 DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT, REFERRED TO IN THIS
7 SECTION AS THE "DEPARTMENT", IN 2019, THERE WERE NINETY-THREE
8 THOUSAND THREE HUNDRED COLORADANS WITHOUT ACCESS TO FAMILY
9 PLANNING SERVICES, INCLUDING FIFTY-EIGHT THOUSAND COLORADANS
10 WHO WERE UNINSURED AND THIRTY-FIVE THOUSAND THREE HUNDRED
11 WHO WERE INSURED, BUT NOT USING THEIR FAMILY PLANNING COVERAGE
12 PRIMARILY DUE TO FEAR OF BREACHES IN CONFIDENTIALITY.

13 (b) THE GENERAL ASSEMBLY FURTHER FINDS THAT THERE HAVE
14 SINCE BEEN IMPORTANT EXPANSIONS IN ACCESS INCLUDING A STATE PLAN
15 AMENDMENT TO EXPAND INCOME ELIGIBILITY FOR SERVICES, THE
16 CREATION OF COVERAGE PROGRAMS FOR UNDOCUMENTED INDIVIDUALS,
17 EXPANSIONS OF COMMERCIAL AND MEDICAID INSURANCE COVERAGE, AND
18 INCREASED FAMILY PLANNING FUNDING. HOWEVER, PERSISTENT GAPS IN
19 ACCESS REMAIN.

20 (2) THE DEPARTMENT SHALL CONVENE A FAMILY PLANNING
21 ACCESS COLLABORATIVE TO COORDINATE WITH THE DEPARTMENT TO
22 ADVISE THE DEPARTMENT IN IDENTIFYING ACCESS GAPS THAT CONTRIBUTE
23 TO APPROXIMATELY NINETY-THREE THOUSAND COLORADANS LACKING
24 FAMILY PLANNING ACCESS INCLUDING, BUT NOT LIMITED TO:

25 (a) PRIVACY AND CONFIDENTIALITY CONCERNS;

26 (b) GAPS IN EXISTING FAMILY PLANNING PROGRAMS;

27 (c) GEOGRAPHIC BARRIERS AND RURAL ACCESS;

1 (d) ABILITY OF ADOLESCENTS TO ACCESS CARE AND SERVICES;

2 (e) FUNDING FOR SERVICES;

3 (f) IDENTIFICATION OF LEGISLATIVE, REGULATORY, AND FUNDING
4 STRATEGIES TO CLOSE ACCESS GAPS IDENTIFIED BY THE COLLABORATIVE.

5 (3) THE DEPARTMENT SHALL INVITE REPRESENTATIVES WITH
6 RELEVANT EXPERTISE IN THE PROVISION OF, FUNDING OF, AND ADVOCACY
7 FOR FAMILY PLANNING SERVICES TO PARTICIPATE IN THE COLLABORATIVE.

8 (4) THE DEPARTMENT SHALL CONVENE THE FAMILY PLANNING
9 ACCESS COLLABORATIVE ON OR BEFORE SEPTEMBER 1, 2023.

10 (5) ON OR BEFORE DECEMBER 15, 2023, THE COLLABORATIVE
11 SHALL PUBLISH RECOMMENDATIONS INFORMED BY THE GAPS IDENTIFIED
12 IN SUBSECTION (2) OF THIS SECTION.

13 (6) FOR THE 2023-24 STATE FISCAL YEAR, THE GENERAL
14 ASSEMBLY SHALL APPROPRIATE TWO HUNDRED THOUSAND DOLLARS FROM
15 THE GENERAL FUND TO THE DEPARTMENT FOR THE PURPOSES OF THIS
16 SECTION.

17 (7) THE DEPARTMENT MAY SEEK, ACCEPT, AND EXPEND GIFTS,
18 GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR THE
19 PURPOSES OF THIS SECTION.

20 (8) THIS SECTION IS REPEALED, EFFECTIVE JULY 1, 2024.

21 SECTION 12. In Colorado Revised Statutes, 10-16-124.5,
22 amend (2)(a) introductory portion; and add (2)(c) and (2)(c.5) as follows:

23 10-16-124.5. Prior authorization form - drug benefits - rules
24 of commissioner - definitions - repeal. (2) (a) Except as provided in
25 paragraph (b) of this subsection (2) SUBSECTION (2)(b) OR (2)(c) OF THIS
26 SECTION, a prior authorization request is deemed granted if a carrier or
27 pharmacy benefit management firm fails to:

1 (c) FOR NONURGENT PRIOR AUTHORIZATION REQUESTS RELATED
2 TO A COVERED PERSON'S HIV PRESCRIPTION DRUG COVERAGE, THE PRIOR
3 AUTHORIZATION REQUEST IS DEEMED GRANTED IF A CARRIER OR
4 PHARMACY BENEFIT MANAGEMENT FIRM FAILS TO:

5 (I) UTILIZE THE PRIOR AUTHORIZATION PROCESS DEVELOPED
6 PURSUANT TO SUBSECTION (3) OF THIS SECTION;

7 (II) FOR PRIOR AUTHORIZATION REQUESTS SUBMITTED
8 ELECTRONICALLY:

9 (A) NOTIFY THE PRESCRIBING PROVIDER WITHIN ONE BUSINESS
10 DAY AFTER RECEIPT OF THE REQUEST THAT THE REQUEST IS APPROVED,
11 DENIED, OR INCOMPLETE, AND IF INCOMPLETE, INDICATE THE SPECIFIC
12 ADDITIONAL INFORMATION, CONSISTENT WITH CRITERIA POSTED
13 PURSUANT TO SUBSECTION (3)(a)(II) OF THIS SECTION, THAT IS REQUIRED
14 TO PROCESS THE REQUEST; OR

15 (B) NOTIFY THE PRESCRIBING PROVIDER WITHIN ONE BUSINESS
16 DAY AFTER RECEIVING THE ADDITIONAL INFORMATION REQUIRED BY THE
17 CARRIER OR PHARMACY BENEFIT MANAGEMENT FIRM PURSUANT TO
18 SUBSECTION (2)(a)(II)(A) OF THIS SECTION, THAT THE REQUEST IS
19 APPROVED OR DENIED; AND

20 (III) FOR NONURGENT AND URGENT PRIOR AUTHORIZATION
21 REQUESTS SUBMITTED ORALLY, BY FACSIMILE, OR BY ELECTRONIC MAIL,
22 NOTIFY THE PRESCRIBING PROVIDER WITHIN ONE DAY AFTER RECEIPT OF
23 THE REQUEST THAT THE REQUEST IS APPROVED OR DENIED.

24 (c.5) THIS SUBSECTION (2)(c.5) AND SUBSECTION (2)(c) OF THIS
25 SECTION ARE REPEALED, EFFECTIVE JULY 1, 2027.

26 **SECTION 13. Appropriation.** (1) For the 2023-24 state fiscal
27 year, \$200,000 is appropriated to the department of public health and

1 environment for use by the prevention services division. This
2 appropriation is from the general fund. To implement this act, the division
3 may use this appropriation for the family planning access collaborative
4 related to women's health.

5 (2) For the 2023-24 state fiscal year, \$67,627 is appropriated to
6 the department of regulatory agencies. This appropriation is from the
7 division of insurance cash fund created in section 10-1-103 (3), C.R.S. To
8 implement this act, the division may use this appropriation as follows:

9 (a) \$37,109 for use by the division of insurance for personal
10 services, which amount is based on an assumption that the division will
11 require an additional 0.5 FTE;

12 (b) \$7,345 for use by the division of insurance for operating
13 expenses; and

14 (c) \$23,263 for the purchase of legal services.

15 (3) For the 2023-24 state fiscal year, \$23,263 is appropriated to
16 the department of law. This appropriation is from reappropriated funds
17 received from the department of regulatory agencies under subsection
18 (2)(c) of this section and is based on an assumption that the department
19 of law will require an additional 0.1 FTE. To implement this act, the
20 department of law may use this appropriation to provide legal services for
21 the department of regulatory agencies.

22 **SECTION 14. Safety clause.** The general assembly hereby finds,
23 determines, and declares that this act is necessary for the immediate
24 preservation of the public peace, health, or safety.