

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

**INTRODUCED**

LLS NO. 23-0933.01 Amber Paoloemilio x5497

**SENATE BILL 23-222**

---

**SENATE SPONSORSHIP**

**Bridges and Kirkmeyer, Zenzinger**

**HOUSE SPONSORSHIP**

**Bird and Sirota, Bockenfeld**

---

**Senate Committees**  
Appropriations

**House Committees**

---

**A BILL FOR AN ACT**

101      **CONCERNING REMOVING COPAYMENT REQUIREMENT FOR CERTAIN**  
102                    **MEDICAID SERVICES, AND, IN CONNECTION THEREWITH, MAKING**  
103                    **AN 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/>.)*

**Joint Budget Committee.** The bill removes the requirement that medicaid recipients pay a copayment for pharmacy and outpatient services. The bill makes an appropriation.

---

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.

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

2 **SECTION 1.** In Colorado Revised Statutes, 25.5-4-209, **amend**  
3 (1)(b); and **repeal** (1)(c) and (1)(d) as follows:

4 **25.5-4-209. Payments by third parties - copayments by**  
5 **recipients - review - appeal - children's waiting list reduction fund.**

6 (1) (b) Subject to any limitations imposed by Title XIX, ~~and the~~  
7 ~~requirements set forth in subsection (1)(c) of this section,~~ a recipient must  
8 SHALL pay at the time of service a portion of the cost of any medical  
9 benefit rendered to the recipient or to the recipient's dependents pursuant  
10 to this article 4 or article 5 or 6 of this title 25.5, as determined by rules  
11 of the state department.

12 (c) ~~(f) Except as otherwise provided in subsection (1)(c)(H) of this~~  
13 ~~section, on and after January 1, 2018, for pharmacy and for hospital~~  
14 ~~outpatient services, including urgent care centers and facilities and~~  
15 ~~emergency services, the rules of the state department required by~~  
16 ~~subsection (1)(b) of this section must require the recipient to pay:~~

17 ~~(A) For pharmacy, at least double the average amount paid by~~  
18 ~~recipients in state fiscal year 2015-16; or~~

19 ~~(B) For hospital outpatient services, at least double the amount~~  
20 ~~required to be paid as specified in the rules as of January 1, 2017.~~

21 ~~(H) For both pharmacy and hospital outpatient services, the~~  
22 ~~amount required to be paid by the recipient shall not exceed any specified~~  
23 ~~maximum dollar amount allowed by federal law or regulations as of~~  
24 ~~January 1, 2017.~~

25 (d) ~~The state department shall evaluate options to exempt~~  
26 ~~individuals who are qualified for institutional care but are instead enrolled~~  
27 ~~in home- and community-based service waivers from the increased~~

1 ~~payment requirements specified in subsection (1)(c) of this section.~~

2           **SECTION 2. Appropriation.** (1) For the 2023-24 state fiscal  
3 year, \$1,886,150 is appropriated to the department of health care policy  
4 and financing. This appropriation consists of \$1,439,499 from the general  
5 fund, which is subject to the "(M)" notation as defined in the annual  
6 general appropriation act for the same fiscal year, and \$446,651 from the  
7 healthcare affordability and sustainability fee cash fund created in section  
8 25.5-4-402.4 (5)(a), C.R.S. To implement this act, the department may  
9 use this appropriation for medical and long-term care services for  
10 medicaid-eligible individuals.

11           (2) For the 2023-24 state fiscal year, the general assembly  
12 anticipates that the department of health care policy and financing will  
13 receive \$5,459,357 in federal funds for medical and long-term care  
14 services for medicaid-eligible individuals to implement this act. The  
15 appropriation in subsection (1) of this section is based on the assumption  
16 that the department will receive this amount of federal funds.

17           **SECTION 3. Safety clause.** The general assembly hereby finds,  
18 determines, and declares that this act is necessary for the immediate  
19 preservation of the public peace, health, or safety.