

CHAPTER 153

INSURANCE

HOUSE BILL 96-1082

BY REPRESENTATIVES Friednash, Armstrong, Chlouber, Clarke, Epps, Hagedorn, Knox, Kreutz, Leyba, Lyle, Morrison, Sullivan, Sullivant, and Tool;
also SENATORS Hopper, Dennis, Hernandez, Martinez, Matsunaka, Pascoe, L. Powers, Tanner, Wattenberg, Weddig, Weissmann, and Wham.

AN ACT

CONCERNING COVERAGE UNDER A HEALTH BENEFIT PLAN OF HEALTH CARE SERVICES RELATED TO A WOMAN'S REPRODUCTIVE SYSTEM PROVIDED BY PARTICIPATING PHYSICIANS WHO ROUTINELY PRACTICE WOMEN'S REPRODUCTIVE SYSTEM HEALTH CARE.

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

SECTION 1. 10-16-102, Colorado Revised Statutes, 1994 Repl. Vol., is amended BY THE ADDITION OF THE FOLLOWING NEW SUBSECTIONS to read:

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

(22.5) "HEALTH COVERAGE PLAN" MEANS A POLICY, CONTRACT, CERTIFICATE, OR AGREEMENT ENTERED INTO BY, OFFERED TO, OR ISSUED BY A CARRIER TO PROVIDE, DELIVER, ARRANGE FOR, PAY FOR, OR REIMBURSE ANY OF THE COSTS OF HEALTH CARE SERVICES.

(26.5) "MANAGED CARE PLAN" MEANS A POLICY, CONTRACT, CERTIFICATE, OR AGREEMENT OFFERED BY A CARRIER TO PROVIDE, DELIVER, ARRANGE FOR, PAY FOR, OR REIMBURSE ANY OF THE COSTS OF HEALTH CARE SERVICES THROUGH THE COVERED PERSON'S USE OF HEALTH CARE PROVIDERS MANAGED BY, OWNED BY, UNDER CONTRACT WITH, OR EMPLOYED BY THE CARRIER BECAUSE THE CARRIER EITHER REQUIRES THE USE OF OR CREATES INCENTIVES, INCLUDING FINANCIAL INCENTIVES, FOR THE COVERED PERSON'S USE OF THOSE PROVIDERS.

SECTION 2. 10-16-107, Colorado Revised Statutes, 1994 Repl. Vol., is amended

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

BY THE ADDITION OF A NEW SUBSECTION to read:

10-16-107. Rate regulation - approval of policy forms - benefit certificates - evidences of coverage - loss ratio guarantees. (5) EFFECTIVE JANUARY 31, 1997, A MANAGED CARE PLAN THAT PROVIDES COVERAGE FOR REPRODUCTIVE HEALTH OR GYNECOLOGICAL CARE SHALL NOT BE ISSUED OR RENEWED UNLESS SUCH PLAN EITHER:

(a) PROVIDES A WOMAN COVERED BY THE PLAN DIRECT ACCESS TO AN OBSTETRICIAN OR GYNECOLOGIST PARTICIPATING AND AVAILABLE UNDER THE PLAN FOR HER REPRODUCTIVE HEALTH CARE OR GYNECOLOGICAL CARE; OR

(b) (I) SUBJECT TO RULES PROMULGATED BY THE COMMISSIONER, HAS PROCEDURES IN PLACE THAT ENSURE THAT, IF A WOMAN COVERED BY THE PLAN REQUESTS A TIMELY REFERRAL TO AN OBSTETRICIAN OR GYNECOLOGIST PARTICIPATING AND AVAILABLE UNDER THE PLAN FOR HER REPRODUCTIVE HEALTH AND GYNECOLOGICAL CARE, THE REQUEST FOR REFERRAL SHALL NOT BE UNREASONABLY WITHHELD. SUCH RULES SHALL INCLUDE, BUT NEED NOT BE LIMITED TO, THE FOLLOWING ISSUES:

(A) WHAT CONSTITUTES A TIMELY REFERRAL;

(B) CIRCUMSTANCES, PRACTICES, POLICIES, CONTRACT PROVISIONS, OR ACTIONS THAT CONSTITUTE AN UNDUE OR UNREASONABLE INTERFERENCE WITH THE ABILITY OF A WOMAN TO SECURE A REFERRAL OR REAUTHORIZATION FOR CONTINUING CARE;

(C) THE PROCESS FOR ISSUING A DENIAL OF A REQUEST, INCLUDING THE MEANS BY WHICH A WOMAN MAY OBTAIN SUCH A DENIAL AND THE REASONS THEREFOR IN WRITING;

(D) ACTIONS THAT CONSTITUTE IMPROPER PENALTIES IMPOSED UPON PRIMARY PROVIDERS AS A RESULT OF REFERRALS MADE PURSUANT TO THIS SUBSECTION (5); AND

(E) SUCH OTHER ISSUES THE COMMISSIONER DEEMS NECESSARY.

(II) IN DEVELOPING RULES PURSUANT TO THIS SUBSECTION (5), THE COMMISSIONER SHALL CONSULT WITH PROVIDERS, INCLUDING, BUT NOT LIMITED TO, FAMILY CARE PHYSICIANS, REPRESENTATIVES OF HEALTH PLANS, AND OTHER APPROPRIATE PERSONS AND MAY CONDUCT SUCH SURVEYS AND ANALYSES AS MAY BE NECESSARY TO DEVELOP THE REGULATION.

SECTION 3. Effective date - applicability. This act shall take effect July 1, 1996, and shall apply to health coverage plans issued or renewed on or after January 31, 1997.

SECTION 4. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Approved: May 22, 1996