

## CHAPTER 330

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**INSURANCE**

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**HOUSE BILL 00-1478**

BY REPRESENTATIVES Dean, Morrison, Alexander, Allen, Clarke, Gordon, Hefley, Keller, Stengel, T. Williams, Bacon Chavez, Coleman, Gagliardi, Gotlieb, Larson, Lawrence, Mace, Miller, Plant, Saliman, Tapia, Tochtrop, S. Williams, Windels, and Zimmerman;  
also SENATOR Wham, Anderson, Epps, Hernandez, Linkhart, Martinez, Pascoe, Phillips, Reeves, Rupert, and Weddig.

**AN ACT**

CONCERNING HEALTH CARE COVERAGE PARITY FOR PROSTHETIC DEVICES.

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

**SECTION 1.** 10-16-104, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SUBSECTION to read:

**10-16-104. Mandatory coverage provisions.** (14) (a) ANY HEALTH BENEFIT PLAN, EXCEPT SUPPLEMENTAL POLICIES COVERING A SPECIFIED DISEASE OR OTHER LIMITED BENEFIT, THAT PROVIDES HOSPITAL, SURGICAL, OR MEDICAL EXPENSE INSURANCE SHALL PROVIDE COVERAGE FOR BENEFITS FOR PROSTHETIC DEVICES THAT EQUAL THOSE BENEFITS PROVIDED FOR UNDER FEDERAL LAWS FOR HEALTH INSURANCE FOR THE AGED AND DISABLED PURSUANT TO 42 U.S.C. SECS. 1395k, 1395l, AND 1395m AND 42 CFR 414.202, 414.210, 414.228, AND 410.100, AS APPLICABLE TO THIS SUBSECTION (14).

(b) FOR THE PURPOSES OF THIS SUBSECTION (14) "PROSTHETIC DEVICE" MEANS AN ARTIFICIAL DEVICE TO REPLACE, IN WHOLE OR IN PART, AN ARM OR LEG.

(c) A HEALTH BENEFIT PLAN MAY REQUIRE PRIOR AUTHORIZATION FOR PROSTHETIC DEVICES IN THE SAME MANNER THAT PRIOR AUTHORIZATION IS REQUIRED FOR ANY OTHER COVERED BENEFIT.

(d) COVERED BENEFITS ARE LIMITED TO THE MOST APPROPRIATE MODEL THAT ADEQUATELY MEETS THE MEDICAL NEEDS OF THE PATIENT AS DETERMINED BY THE INSURED'S TREATING PHYSICIAN.

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

(e) REPAIRS AND REPLACEMENTS OF PROSTHETIC DEVICES ARE ALSO COVERED, SUBJECT TO COPAYMENTS AND DEDUCTIBLES, UNLESS NECESSITATED BY MISUSE OR LOSS.

(f) A CARRIER MAY REQUIRE THAT, IF COVERAGE IS PROVIDED THROUGH A MANAGED CARE PLAN, THE BENEFITS MANDATED PURSUANT TO THIS SUBSECTION (14) SHALL BE COVERED BENEFITS ONLY IF THE PROSTHETIC DEVICES ARE PROVIDED BY A VENDOR AND PROSTHETIC SERVICES ARE RENDERED BY A PROVIDER WHO CONTRACTS WITH OR IS DESIGNATED BY THE CARRIER, TO THE EXTENT THAT A CARRIER PROVIDES IN-NETWORK AND OUT-OF-NETWORK SERVICES, THE COVERAGE FOR THE PROSTHETIC DEVICE SHALL BE OFFERED NO LESS EXTENSIVELY.

**SECTION 2. Effective date - applicability.** (1) This act shall take effect January 1, 2001, unless a referendum petition is filed during the ninety-day period after final adjournment of the general assembly that is allowed for submitting a referendum petition pursuant to article V, section 1 (3) of the state constitution. If such a referendum petition is filed against this act or an item, section, or part of this act within such period, then the act, item, section, or part shall take effect on the specified date only if approved by the people.

(2) The provisions of this act shall apply to health policies, plans, or contracts issued or renewed on or after the applicable effective date of this act.

Approved: June 1, 2000