

CHAPTER 395

HEALTH CARE POLICY AND FINANCING

HOUSE BILL 09-1047

BY REPRESENTATIVE(S) Todd, Apuan, Fischer, Gerou, Ryden, Schafer S., Vigil, Frangas, Green, Kefalas, Labuda, McFadyen;
also SENATOR(S) Williams, Boyd, Gibbs, Groff, Hodge, Morse, Newell, Tochtrop.

AN ACT

CONCERNING A PROGRAM FOR PROVIDING ADDITIONAL THERAPIES TO CERTAIN PERSONS WITH DISABILITIES WHO ARE ELIGIBLE TO RECEIVE MEDICAID, AND MAKING AN APPROPRIATION IN CONNECTION THEREWITH.

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

SECTION 1. Article 6 of title 25.5, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW PART to read:

PART 13
COMPLEMENTARY AND ALTERNATIVE
THERAPIES FOR A PERSON WITH A SPINAL CORD INJURY

25.5-6-1301. Legislative declaration. (1) THE GENERAL ASSEMBLY FINDS THAT:

(a) A PERSON WITH A SPINAL CORD INJURY COULD BENEFIT FROM COMPLEMENTARY AND ALTERNATIVE THERAPIES SUCH AS CHIROPRACTIC CARE, MASSAGE THERAPY, OR ACUPUNCTURE; AND

(b) COMPLEMENTARY AND ALTERNATIVE THERAPIES COULD IMPROVE THE QUALITY OF LIFE AND HELP REDUCE THE NEED FOR CONTINUOUS OR MORE EXPENSIVE PROCEDURES, MEDICATIONS, AND HOSPITALIZATIONS FOR A PERSON WITH A SPINAL CORD INJURY AND COULD ALLOW A PERSON WITH A SPINAL CORD INJURY TO BE EMPLOYED.

25.5-6-1302. Definitions. AS USED IN THIS PART 13, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(1) "COMPLEMENTARY OR ALTERNATIVE THERAPY" MEANS A FORM OF DIVERSE

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

HEALTH CARE THERAPY NOT PROVIDED FOR UNDER THIS ARTICLE OR ARTICLE 4 OR 5 OF THIS TITLE PRIOR TO THE EFFECTIVE DATE OF THIS PART 13 BUT AUTHORIZED BY THE RULES OF THE STATE BOARD ADOPTED PURSUANT TO SECTION 25.5-6-1303 (4). THE THERAPY SHALL BE LIMITED TO CHIROPRACTIC CARE, MASSAGE THERAPY, AND ACUPUNCTURE PERFORMED BY LICENSED OR CERTIFIED PROVIDERS.

(2) "ELIGIBLE PERSON WITH A DISABILITY" MEANS A PERSON WITH A DISABILITY WHO MEETS THE ELIGIBILITY CRITERIA SPECIFIED IN SECTION 25.5-6-1303 (2) (b).

(3) "PILOT PROGRAM" MEANS THE PILOT PROGRAM AUTHORIZED PURSUANT TO SECTION 25.5-6-1303 TO ALLOW AN ELIGIBLE PERSON WITH A DISABILITY TO RECEIVE COMPLEMENTARY AND ALTERNATIVE THERAPIES.

25.5-6-1303. Pilot program - complementary or alternative therapies - rules.

(1) THE GENERAL ASSEMBLY AUTHORIZES THE STATE DEPARTMENT TO IMPLEMENT A PILOT PROGRAM THAT WOULD ALLOW AN ELIGIBLE PERSON WITH A DISABILITY TO RECEIVE COMPLEMENTARY OR ALTERNATIVE THERAPIES TO THE EXTENT AUTHORIZED BY FEDERAL WAIVER. THE PILOT PROGRAM SHALL BEGIN NO LATER THAN JANUARY 1, 2012. THE STATE DEPARTMENT SHALL DESIGN AND IMPLEMENT THE PILOT PROGRAM WITH INPUT FROM AN ADVISORY COMMITTEE THAT SHALL INCLUDE, BUT NEED NOT BE LIMITED TO, PERSONS WITH SPINAL CORD INJURIES WHO ARE RECEIVING COMPLEMENTARY OR ALTERNATIVE THERAPIES. THE STATE DEPARTMENT IS AUTHORIZED TO SEEK ANY FEDERAL WAIVERS THAT MAY BE NECESSARY TO IMPLEMENT THIS PART 13.

(2) (a) THE PURPOSE OF THE PILOT PROGRAM SHALL BE TO EXPAND THE CHOICE OF THERAPIES AVAILABLE TO ELIGIBLE PERSONS WITH DISABILITIES, TO STUDY THE SUCCESS OF COMPLEMENTARY AND ALTERNATIVE THERAPIES, AND TO PRODUCE AN OVERALL COST SAVINGS FOR THE STATE COMPARED TO THE ESTIMATED EXPENDITURES THAT WOULD HAVE OTHERWISE BEEN SPENT FOR THE SAME PERSONS WITH SPINAL CORD INJURIES ABSENT THE PILOT PROGRAM.

(b) IN ORDER TO QUALIFY AND TO REMAIN ELIGIBLE FOR THE PILOT PROGRAM AUTHORIZED BY THIS SECTION, A PERSON SHALL:

(I) BE DIAGNOSED WITH A SPINAL CORD INJURY;

(II) BE WILLING TO PARTICIPATE IN THE PILOT PROGRAM;

(III) DEMONSTRATE A CURRENT NEED, AS FURTHER DEFINED IN RULE BY THE STATE BOARD, FOR COMPLEMENTARY OR ALTERNATIVE THERAPIES; AND

(IV) BE ELIGIBLE FOR MEDICAID, INCLUDING BUT NOT LIMITED TO PERSONS WHOSE GROSS INCOME DOES NOT EXCEED THREE HUNDRED PERCENT OF THE CURRENT FEDERAL SUPPLEMENTAL SECURITY INCOME BENEFIT LEVEL AND WHO ARE ELIGIBLE FOR A HOME- AND COMMUNITY-BASED PROGRAM AUTHORIZED PURSUANT TO THIS TITLE OR THE CONSUMER-DIRECTED ATTENDANT SUPPORT PILOT PROGRAM AUTHORIZED PURSUANT TO PART 10 OF ARTICLE 6 OF THIS TITLE.

(3) THE STATE DEPARTMENT SHALL DEVELOP THE ACCOUNTABILITY REQUIREMENTS FOR THE PILOT PROGRAM NECESSARY TO SAFEGUARD THE USE OF

PUBLIC MONEYS AND TO PROMOTE EFFECTIVE AND EFFICIENT SERVICE DELIVERY.

(4) THE STATE BOARD SHALL ADOPT RULES AS NECESSARY FOR THE IMPLEMENTATION AND ADMINISTRATION OF THE PILOT PROGRAM.

(5) THE STATE DEPARTMENT SHALL CAUSE TO BE CONDUCTED AN INDEPENDENT EVALUATION OF THE PILOT PROGRAM TO BE COMPLETED BY THE END OF THE THIRD YEAR OF THE PILOT PROGRAM. THE STATE DEPARTMENT SHALL PROVIDE A REPORT OF THE EVALUATION TO THE HEALTH AND HUMAN SERVICES COMMITTEES OF THE SENATE AND THE HOUSE OF REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, BY AUGUST 1, 2015. THE REPORT ON THE EVALUATION SHALL INCLUDE THE FOLLOWING:

(a) THE NUMBER OF ELIGIBLE PERSONS WITH DISABILITIES PARTICIPATING IN THE PILOT PROGRAM;

(b) THE COST-EFFECTIVENESS OF THE PILOT PROGRAM;

(c) FEEDBACK FROM CONSUMERS AND THE STATE DEPARTMENT CONCERNING THE PROGRESS AND SUCCESS OF THE PILOT PROGRAM;

(d) ANY CHANGES TO THE HEALTH STATUS OR HEALTH OUTCOMES OF THE PERSONS PARTICIPATING IN THE PILOT PROGRAM;

(e) OTHER INFORMATION RELEVANT TO THE SUCCESS AND PROBLEMS OF THE PILOT PROGRAM; AND

(f) RECOMMENDATIONS CONCERNING THE FEASIBILITY OF CONTINUING THE PILOT PROGRAM BEYOND THE PILOT STAGE AND CHANGES, IF ANY, THAT ARE NEEDED.

(6) THE STATE DEPARTMENT IS AUTHORIZED TO SEEK AND ACCEPT GIFTS, GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR THE PURPOSES OF THIS PART 13; EXCEPT THAT THE STATE DEPARTMENT SHALL NOT ACCEPT A GIFT, GRANT, OR DONATION IF IT IS SUBJECT TO CONDITIONS THAT ARE INCONSISTENT WITH THIS PART 13 OR ANY OTHER LAW OF THE STATE. THE STATE DEPARTMENT SHALL TRANSMIT ALL PRIVATE AND PUBLIC MONEYS RECEIVED THROUGH GIFTS, GRANTS, OR DONATIONS TO THE STATE TREASURER, WHO SHALL CREDIT THE SAME TO THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING CASH FUND CREATED PURSUANT TO SECTION 25.5-1-109.

(7) UNLESS THE STATE DEPARTMENT RECEIVES SUFFICIENT MONEYS FROM EITHER THE GENERAL FUND OR FROM GIFTS, GRANTS, AND DONATIONS MADE PURSUANT TO SUBSECTION (6) OF THIS SECTION, THE STATE DEPARTMENT SHALL NOT BE REQUIRED TO SEEK FEDERAL APPROVAL OR IMPLEMENT THE PILOT PROGRAM.

25.5-6-1304. Repeal of part. THIS PART 13 IS REPEALED, EFFECTIVE SEPTEMBER 1, 2015.

SECTION 2. Appropriation. In addition to any other appropriation, there is hereby appropriated, to the department of health care policy and financing, executive director's office, for general administration, for the fiscal year beginning

July 1, 2009, the sum of fifty-three thousand four hundred eighty dollars (\$53,480) and 0.8 FTE, or so much thereof as may be necessary, for the implementation of this act. Of said sum, twenty-six thousand seven hundred forty dollars (\$26,740) shall be cash funds from the department of health care policy and financing cash fund created in section 25-5-1-109, Colorado Revised Statutes, and twenty-six thousand seven hundred forty dollars (\$26,740) shall be from federal funds.

SECTION 3. Act subject to petition - effective date. This act shall take effect at 12:01 a.m. on the day following the expiration of 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, (August 5, 2009, if adjournment sine die is on May 6, 2009); except that, if 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, if approved by the people, shall take effect on the date of the official declaration of the vote thereon by proclamation of the governor.

Approved: June 2, 2009