



March 2025

To: House Business Affairs & Labor

Re: HB25-1300—Workers' compensation Benefits Proof of Entitlement

Dear Committee Members,

The American Association of University Women (AAUW) is one of the oldest women's organizations in the country, empowering women since 1881. The mission of AAUW is to advance equity for women and girls through research, education and advocacy. More than 700 community leaders are members of AAUW branches across Colorado.

Over the years, progress has been made in achieving fairness for working women. Yet, hurdles remain, and women are especially vulnerable to workplace health and safety hazards. HB1300 makes several key modifications to existing statute by shifting the burden of proof away from the injured employee, and provides injured workers more control over the selection of their primary treating physicians.

AAUW of Colorado strongly supports House Bill1300 and requests your YES vote in committee and throughout the process of becoming a law.

Thank you for your consideration,

A handwritten signature in blue ink that reads "Su Ryden".

**Su Ryden**  
**AAUW of Colorado Public Policy Co-Director**

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*American Association of University Women--AAUW is a top-rated 501(c)3 charitable organization whose mission is to advance gender equity for women and girls through research, education, and advocacy.*



March 26, 2025

The Honorable Naquetta Ricks,  
Chair, House Business Affairs & Labor Committee  
Colorado General Assembly  
200 E. Colfax Avenue  
Denver, CO 80203

Chair Ricks and Members of the Business Affairs & Labor Committee,

We at Enlyte appreciate the opportunity to comment on and share our concerns regarding the significant changes contained in HB 25-1300 Re: Workers' Compensation Benefits Proof of Entitlement.

We are interested in this legislation because at Enlyte/Coventry we maintain the largest directly contracted property and casualty-focused healthcare provider network. Our organization maintains compliance with state regulations for our partners and has an interest in maintaining a smooth and streamlined process, ensuring our contracted physicians and clients can provide the greatest overall outcome for Coloradans injured at work.

Our concern is with the change this legislation makes in how an injured worker selects a treating physician. Colorado's current system, allowing for employee choice from a list of four treating physicians, corporate medical providers, or both where available, provides a middle ground that provides a choice of provider to the injured worker and helps contain system costs for employers. It is in the interest of all system stakeholders to see this process work smoothly for the injured worker and for an injured worker to receive quality care they are comfortable with. The current system works to provide a choice of providers who are trusted to provide that quality care. By requiring an injured worker to select a provider, in writing, from a department vetted list of Level I or Level II accredited physicians, which still may not include a worker's trusted primary care physician, this legislation adds significant complexity without real benefit for workers. If changes are necessary to expand the injured worker's choice or ensure provider quality, we would prefer to see a more measured approach that introduces less complexity into the Colorado workers' compensation system, utilizing the current, already tested approach to physician choice.

Thank you for your consideration of our comments today. If you have any questions or require any clarification, please do not hesitate to reach out, we would be happy to provide additional information.

Sincerely,

A handwritten signature in black ink, appearing to read "Steven Peters".

Steven Peters  
Director, Government Relations - Coventry  
[Steven.Peters@enlyte.com](mailto:Steven.Peters@enlyte.com)

March 25, 2025

The Honorable Chair Naquetta Ricks and  
Members of the Committee  
House Business Affairs & Labor Committee  
Colorado General Assembly  
200 E. Colfax Avenue  
Denver, Colorado 80203

*Sent via Email*

**RE: HB25-1300, Workers' Compensation Benefits Proof of Entitlement**

Dear Chair Ricks and Committee Members:

The American Property Casualty Insurance Association (APCIA) includes member companies of many sizes and varying business models that represent two-thirds of the property and casualty insurance market in Colorado and a diverse group of member companies serving Coloradoans. Our member companies have a long-term commitment to the people, enterprises, and communities they insure.

APCIA writes in opposition to HB25-1300 as a bill that would prohibit the employer from directing the selection of the injured worker's medical provider and shifts the burden of proof to the employer that the medical services at issue are reasonable, necessary and related to the workplace injury. The legislation risks denying the injured worker the most effective medical care to treat the workplace injury, delays appropriate return to work, and unnecessarily increases medical and indemnity costs.

The current process, whereby employers provide a panel of four medical providers and the injured worker selects a treating provider from the panel best supports the goal of quick and efficient delivery of medical services to injured workers at a reasonable cost to employers, with a minimum of delays and disputes. Selection by the injured worker from a panel of providers chosen by the employer allows the employer to provide access to medical professionals who are well-prepared and trained to diagnose and treat occupational injuries and assist the injured worker and the employer with return-to-work decisions.

Employer selection of physician panels is a critical component in helping to control medical inflation while still ensuring that the worker receives appropriate treatment focused on getting the injured worker healthy and back to work.

The employer selects provider panels that understand the employer's workplace and the nature of the work to establish effective return to work programs. An experienced, knowledgeable medical provider plays an essential role in the success of treatment, which, in turn, contributes to a successful outcome of the workers' compensation claim. Further, employer selection of physician panels allows employers to negotiate

discounts as well as curb unnecessary utilization and maintain quality of care. Employers have an incentive to send employers to those physicians who provide the best care, as this will lessen the impact of the injury and time off from work, and, ultimately, the cost of indemnity benefits.

Employee choice of the treating provider often results in unintended consequences, including over-treatment or ineffective treatment of patients, delayed recovery and rehabilitation, unnecessary and excessive fees, and additional disputes. The data supports current Colorado law and practice:

- A 2005 study by the Workers' Compensation Research Institute ("WCRI"), an independent, not-for-profit research organization providing high quality, objective information on workers' compensation issues, concluded that costs were generally higher and return to work results poorer, when the employer did not select the medical provider.
- A 2002 WCRI study estimates the cost difference between employer and employee choice of the treating provider is between 7% to 10% higher in states utilizing employee choice. A 1990 WCRI study showed that when Illinois and Texas changed from employer choice to employee choice of treating provider, average medical costs increased 8% to 11% in Illinois and between 7% and 29% in Texas. A 2017 WCRI study indicates that injuries involving back and neck sprains, strains, and non-specific pain, or neurologic spine pain, were higher when the employee had control over the choice of provider.

HB25-1300 would also shift the burden of proof to the employer on issues involving whether the medical treatment is reasonable, necessary or related to the workplace injury. Workers' compensation is a no-fault system where the employer accepts liability for indemnity benefits and full medical costs, without limits, deductibles or co-pays, for *all workplace injuries, even in the absence of any fault* by the employer. Such a no-fault system cannot remain stable and economically efficient unless the burden is on the claimant to at least prove that the medical costs he or she is seeking recovery for are related to a workplace injury and is reasonable and necessary to treat the workplace injury.

APCIA appreciates your thoughtful consideration of this important issue and asks you to vote "no" on HB25-1300.

Respectfully Yours,



Lyn D. Elliott  
Vice President, State Government Relations – Mountain Region