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Members of the Senate House and Human Services Committee

March 10, 2026

Please accept my written testimony in support of House Bill 26-1070.

My name is Kevin Patterson; I am an oral-maxillofacial surgeon in Denver and immediate past-president of the Colorado Dental Association. I am submitting this written testimony on behalf of myself and the Colorado Dental Association in favor of HB 1070. I would first like to thank Senators Jodeh and Frizell for sponsoring this bill and recognizing that it will provide substantial protection for patients and prevent unwanted limitation of access to care.

Network leasing sometimes labeled rental networks, or passive PPOs allows an insurance company to lease a dentist's contracted rate to other insurance companies without the dentist's direct agreement. That means a dentist who signs a contract with one plan suddenly becomes an in-network provider for multiple plans they have never reviewed, negotiated, or consented to. Once this happens it can be exceedingly difficult or near impossible for a provider to opt out of these plans. For patients, this can lead to confusion and potential financial harm.

Patients select a dentist believing they are in-network and schedule care based on that understanding. Once a patient is seen for care they may receive different coverage levels, unexpected limitations, or higher out-of-pocket costs. This can result in frustration, surprise bills, and a breakdown of trust in their healthcare provider.

HB26-1070 addresses these problems by increasing transparency and requiring consent and disclosure when networks are leased. It ensures that if a dentist's contract is going to be extended to another carrier, it happens clearly, deliberately, with accountability and with the knowledge of the provider. So, in essence this bill is truly about transparency.

When networks are expanded through leasing, insurers can advertise broad access without actually negotiating a contract with providers. This can distort the size of the provider market and ultimately reduce true access to care as some providers limit participation or leave networks entirely because they cannot sustainably operate under undisclosed and not agreed upon fee schedules.

This instability can hurt patients, especially seniors, families on fixed incomes, and those in rural communities. HB-1070 would restore clarity and strengthen consumer protection. It would ensure patients know which dentists are in their network and prevents hidden contractual arrangements from undermining access to affordable dental care.

For these reasons, on behalf of myself as a provider and the Colorado Dental Association I respectfully ask for your support of HB26-1070.

Thank you,

Kevin Patterson, DDS, MD



1700 N Lincoln Street
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<http://colohealthplans.org>

March 19, 2026

Senate Health & Human Services Committee
Colorado General Assembly
200 E. Colfax Avenue
Denver, CO 80203

RE: House Bill 26-1070 — Third-Party Network Agreements for Dental Services

Chair and Members of the Committee:

On behalf of the Colorado Association of Health Plans (CAHP), thank you for the opportunity to provide written comments regarding House Bill 26-1070.

CAHP respectfully opposes House Bill 26-1070 as currently drafted.

We share many of the concerns raised by other stakeholders, including the American Council of Life Insurers (ACLI) and the National Association of Dental Plans (NADP), particularly in two key areas.

First, the bill's treatment of affiliate relationships under Section 10 is too narrow. As drafted, the exemption language does not adequately recognize longstanding, legitimate affiliate and brand-license structures that operate within the same corporate family. These arrangements are common in health coverage markets and serve important operational and consumer-facing functions.

Second, the bill's definition and implementation of "affirmative consent" (page 2, lines 7–10; page 3, lines 1–5) is overly prescriptive and administratively burdensome. While CAHP supports transparency and provider choice, the approach outlined in the bill would create significant operational complexity without clear additional benefit to consumers.

We believe there is a more balanced path forward. The NCOIL model adopted in other states provides a framework that protects providers while appropriately recognizing affiliate structures and avoiding unnecessary administrative hurdles.

Thank you for your consideration and We look forward to continued dialogue on this issue.

Sincerely,



Kevin M. McFatrige
Executive Director



March 19, 2026

The Honorable Kyle Mullica
Chair, Senate Health & Human Services Committee
Colorado General Assembly
200 E Colfax Avenue
Denver, CO 80203

RE: HB 1070 - Third-Party Network Agreements for Dental Services – Oppose

Dear Chair Mullica, Vice Chair Jodeh, and Members of the Committee,

On behalf of the National Association of Dental Plans (NADP)¹ and the American Council of Life Insurers (ACLI)², thank you for the opportunity to provide comments in opposition to HB 1070. While we share the goal of protecting consumers and promoting transparency in dental benefit contracting, this bill would unintentionally reduce access to care, increase costs, and destabilize provider networks, ultimately harming Colorado families.

Background on Network Leasing

Network leasing allows a dental benefit plan to lease its provider network to another plan, expanding a provider's patient base and increasing access to care. Providers agree to discounted rates in exchange for access to more patients, creating value for all parties: providers gain patient volume, employers gain more affordable benefit options, and consumers gain broader access to in-network care at predictable costs.

Opt-Out vs. Opt-In

In 2020, the National Council of Insurance Legislators (NCOIL) adopted the *Transparency in Dental Benefits Contracting Model Act*, which includes network leasing provisions designed to increase transparency, strengthen provider flexibility, and preserve network stability. In 2025, that network leasing language was readopted without amendment,

¹ NADP is the largest non-profit trade association focused exclusively on the dental benefits industry. NADP's members provide dental HMO, dental PPO, dental indemnity and discount dental products to more than 200 million Americans with dental benefits. Our members include the entire spectrum of dental carriers: companies that provide both medical and dental coverage, companies that provide only dental coverage, major national carriers, regional, and single state companies, as well as companies organized as non-profit plans.

² ACLI is the leading trade association driving public policy and advocacy on behalf of the life insurance industry. 90 million American families rely on the life insurance industry for financial protection and retirement security. ACLI's member companies are dedicated to protecting consumers' financial wellbeing through life insurance, annuities, retirement plans, long-term care insurance, disability income insurance, reinsurance, and dental, vision and other supplemental benefits. ACLI's 275 member companies represent 94 percent of industry assets in the United States.

reaffirming its effectiveness. To date, **18 states have already adopted these opt-out network leasing provisions**. We strongly support adoption of the NCOIL model provisions related to network leasing as a proven, tested alternative to HB 1070.

Under the NCOIL opt-out structure, providers are fully informed of leasing practices when they join a network and receive advance notice of specific leasing arrangements at least 30 days before the relationship takes effect. Providers retain the right to decline participation in network leasing through the opt-out process. This preserves meaningful control over their participation while maintaining overall network stability.

By contrast, HB 1070's opt-in requirement would fundamentally undermine the workability of dental networks. These networks are carefully constructed systems designed to deliver cost savings, expanded access, quality oversight, and administrative efficiency. Requiring affirmative consent for each leasing arrangement introduces uncertainty and fragmentation into systems that rely on predictable participation.

An opt-in mandate shifts the consequences of administrative delay from providers to patients. Providers who are delayed in responding, often due to busy practices or limited administrative staff, could unintentionally fall out of leased networks as plans merge, rebrand, or add employer groups. These gaps would not reflect a substantive objection to participation, yet patients would bear the impact.

Consumer Impact

Network leasing directly benefits consumers by:

- Extending discounted, in-network rates to more patients, reducing surprise billing and supporting predictable out-of-pocket costs.
- Operating within established credentialing and oversight systems that promote quality and clinical appropriateness.
- Expanding the number of in-network providers, including in rural and underserved areas, improving access to preventive and ongoing care.

HB 1070's opt-in structure would jeopardize these benefits. Patients could unknowingly receive care from providers who were not automatically renewed into leased networks, resulting in unexpected out-of-network charges or mid-treatment disruptions in services.

At the same time, the bill would impose significant administrative burdens on both providers and insurers. Plans would be required to issue repeated notices and track affirmative responses, while providers would need to process multiple opt-in requests across numerous plans and leasing entities. These inefficiencies would reduce network

participation and increase operational costs that ultimately flow to families and small employers through higher premiums, increased cost-sharing, or reduced benefits.

A Proven Alternative: The NCOIL Model

Colorado consumers are best served by policies that preserve access to care, promote affordability, and ensure transparency without destabilizing provider networks. The NCOIL model strikes that balance by strengthening transparency, enhancing provider choice, and protecting patients without creating the unintended consequences embedded in the opt-in model proposed by HB 1070.

For these reasons, we respectfully urge the Committee to reject HB 1070 and instead adopt the NCOIL model as the appropriate balanced framework for Colorado.

Thank you for your consideration and commitment to protecting Colorado consumers.

Respectfully submitted,



Bianca Balale
Director of Government Relations
National Association of Dental Plans
(NADP)



Melissa I. Young
Regional Vice President, State Relations
American Council of Life Insurers (ACLI)

Senate Health & Human Services Committee Members,

My name is Dr. Kerri Lawlor, and I am a dentist living in Highlands Ranch and practicing in Lone Tree. I am writing today to urge you to support HB 1070 Third-Party Network Agreements for Dental Services.

As a private practice owner, I deal with insurance every day and I have experienced the challenges and problems with insurance carriers being able to lease my services to other carriers, without my knowledge or consent.

I recently experienced network leasing issues that created extremely frustrating problems for my dental practice. I decided to drop one carrier as a preferred provider. I knew that this carrier also uses network leasing, so I was also very clear with the other carriers I work with that I was NOT willing to be network leased back to the carrier I had just dropped. I did everything in my power to make sure this was clearly stated to the carriers I work with. The carriers I work with confirmed that I would not be picked up through a network lease to the carrier I dropped.

Then, I noticed that the dropped carrier was still processing my dental office as in-network. I found out that despite assurances from other carriers, I was in fact being leased to that dropped carrier. And, when I once again reached out to ask to remove me from the lease, I was then told that I would have to leave ALL plans, not just the one I chose to drop. This seems extremely unfair and is harmful to my patients who have those plans that I am not trying to drop out of, but am being told it's either all or nothing. Not to mention, no one at any of these companies ever communicates any of this to us. Not in a letter, an email or any type of notification.

This issue created confusion for my office and confusion for patients. When these issues come up, where we as the dentist and our dental office are unaware of benefit plan details, even when we've tried to be very clear with the carriers we work with, it affects our relationship with patients in a very negative way. We may appear dishonest and can't give accurate estimates for patients. This can impact our ability to create a dental treatment plan for our patients and leave them without the dental care they need.

It is not fair to patients or to dentists to have to deal with this kind of confusion, when a simple solution is for a carrier to ask a dentist before leasing their services, and to communicate with a dentist about lease agreements and the terms and benefit plans that apply, if they do agree to be leased.

HB 1070 ensures that dentists and patients alike get more clarity and understanding of dental benefits, and ensures that dentists are informed about and consent to any dental benefit plan that they will be a part of. Thank you to Senator Jodeh and Senator Frizell for bringing this important legislation forward, and I urge you to support House Bill 1070.

Thank you,
Kerri Lawlor, D.D.S.



Tuesday, March 17, 2026

To: Members of the Senate Health & Human Services Committee

Re: Healthier Colorado Support for [HB26-1070: Third-Party Network Agreements for Dental Services](#)

To the Members of the Senate Health & Human Services Committee,

Thank you Chair Mullica and honorable members of the Senate Health & Human Services Committee. My name is Christina Walker and I am the Senior Director of Policy at Healthier Colorado, a nonprofit organization dedicated to providing every Coloradan with the opportunity to live a healthy life. Thank you for the opportunity to submit written testimony in support of HB26-1070: Third Party Network Agreements for Dental Services.

Currently, insurance carriers can add a dental provider to their insurance network through leased network agreements, which is when one insurance carrier agrees to share its network of dentists with another carrier. Often, dentists are leased without their knowledge or approval, and do not always receive communication about their new in-network status with another carrier, how benefits apply, or what costs a third-party insurer will or won't cover for a patient. The lack of communication leads to confusion for patients, dentists, and dental office staff alike. Dentists and their staff are not able to accurately educate patients about the cost of their treatment options, patients may be left with unexpected out-of-pocket costs if their dental benefits change without their knowledge. These issues can erode trust between the dental practice and the patient when there is confusion around billing and insurance coverage.

Dentists and dental offices have shared stories of patients that have been negatively impacted by these leased network agreements. For example, patients may need to unnecessarily delay treatment so that the dental office staff and the patient have time to clarify benefits and coverage amounts. Billing errors also occur often, as dentists can be leased or unleased at any time throughout the plan year, and when that happens without notification, dental office staff will likely not know to update the coverage plan associated with the patients. And patients do not know that their dental provider is part of a leased network or not, leading to confusion and mistrust when treatment plan estimates are incorrect.

House Bill 1070 simply requires that an insurance carrier seeks consent from a dental provider before they lease the provider to other carriers and sets up basic transparency and communication standards so that patients and providers are fully informed about the costs of care as early as possible in any health care transaction. Insurance can be confusing already, with complex terms, changing coverage rules, and unexpected costs creating unnecessary stress for patients. This is a common-sense way to ensure patients have informed access to dental care, empowering them with clear information so they can make confident decisions about their health without added uncertainty or barriers.

To better support our dental providers and patients across the state, I urge your support for House Bill 1070. Please do not hesitate to reach out if you have any questions.



HEALTHIER™
COLORADO

Best,

Christina Walker

Christina Walker
Senior Director of Policy, Healthier Colorado
cwalker@healthiercolorado.org

Dear Senate Health & Human Services Committee,

My name is Dr. Jillian Stacey, and my parents own a private practice in Colorado Springs that I work at. I reside in Monument and am the current President of the Colorado Dental Association. I am asking for your support of HB26-1070 Third-Party Network Agreements for Dental Services.

As a dentist owner of a private practice, we deal with network lease issues frequently. We have had insurance carriers stop directly contracting their network of dentists and instead lease out their networks without providers' knowledge.

This allows them to make significant alterations to benefit plan terms and fees. These alterations occur even if there are no changes in the actual insurance carriers we work with, or the care we provide to the patients who have that insurance.

Changing to a leased network may benefit the insurance carrier's bottom line, but it complicates and hampers our ability to plan dental care services for our patients.

This is challenging from an administrative perspective for our small dental office, and it is frustrating to have carriers pull a bait and switch on us like this regarding what they will pay for dental services. But it is even more problematic for our patients.

The same insurance company the patient has always had, and we've always worked with, can suddenly change because the carrier decides to start leasing a network instead of contracting with dental offices. The patient, who has always relied on a certain dental benefit with that insurance carrier, is suddenly told that the terms have changed, and they may have to pay more for care.

From one dental visit to the next, the patient's benefits can change, and we aren't aware, so we can't help inform them about their dental care costs.

When we don't get communication about these changes happening behind the scenes, and we don't have the right to have a say in the decisions, it is very problematic for our ability to deliver care to our patients, and for patients to have a reliable dental benefit.

This bill will make sure that we as dentists are informed about the dental benefits of the patients we serve, and allow us to work with our patients to make the best decisions for their dental care.

I urge you to support HB1070, and I appreciate Sen. Jodeh and Sen. Frizell for sponsoring this bill.

Thank you,

Jillian Stacey, D.D.S.

Mister Chair and Senate Health & Human Services Committee members,

My name is Dr. Nate Kunzman, and I am reaching out to ask you to support HB1070 Third-Party Network Agreements for Dental Services, sponsored by Senator Jodeh and Senator Frizell.

I am a dentist and private practice owner in Greeley, where my team and I are committed to ensuring that every patient receives the highest quality care in a welcoming, stress-free environment.

Unfortunately, network leasing by insurance carriers is an issue that causes stress for my team and I, and for my patients. When I do not agree to be leased, or I do not get information about being leased, I don't have the tools and information I need to be sure that I can properly advise my patients about their treatment plans and cost for dental care.

Patients are frequently told by insurers or benefit administrators that a dental practice is "in-network," but without dental practices like mine knowing these details, there can be discrepancies in coverage, reimbursement levels, or out-of-pocket costs for patients.

This confusion erodes patient trust, complicates treatment planning, and can lead patients to delay or forgo necessary dental care.

This bill protects the integrity of the dentist-patient relationship. When I agree to participate in an insurance network, I'm making a commitment to my patients about what care they'll receive and at what cost. That commitment shouldn't be compromised by hidden third-party arrangements.

Additionally, network leasing significantly increases administrative burdens, especially for small business dental practices like mine. My team and I spend substantial time identifying leased networks, correcting payment discrepancies, and responding to patient confusion, all of which increases overhead costs and reduces time available for patient care.

HB1070 restores basic contractual fairness and transparency. When I sign a contract with an insurance carrier, I expect that agreement to remain between us. My network participation is a business asset. It represents years of building relationships with insurance carriers, negotiating rates that reflect my overhead costs, and maintaining the quality standards my patients expect. This bill doesn't restrict insurance carriers—it simply requires them to get my permission before sharing my contractual arrangements.

Thank you for your time today, and please support HB1070.

Nate Kunzman, D.M.D.

Dear Chair Mullica and Senate Health & Human Services Committee Members,

My name is Dr. Lori Trembath, and I am a dentist living and practicing in Thornton and I am a constituent of Committee Chair Mullica. I am asking that you please **support HB 1070 Third-Party Network Agreements for Dental Services.**

As a private practice owner, I deal with insurance every day and I have experienced the challenges and problems with insurance carriers being able to lease my services to other carriers, without my knowledge or consent.

I recently became aware that an insurance carrier, who I purposefully chose not to contract with, had received a lease agreement from another carrier for access to my dental care services. Because I did not contract directly with the carrier who received the leased services, it was very difficult to confirm patient benefits and coverage for that carrier, because I was never given any information about the plan I was leased into, and what terms and conditions I was forced into.

This created confusion with my administrative team and confusion with patients. When these issues come up, where we as the dentist and our dental office are unaware of benefit plan details, it affects our relationship with patients in a very negative way. We appear dishonest and can't give accurate estimates for patients. This can impact our ability to create a dental treatment plan for our patients and leave them without the dental care they need.

It is not fair to patients or to dentists to have to deal with this kind of confusion, when a simple solution is for a carrier to ask a dentist before leasing their services, and to communicate with a dentist about lease agreements and the terms and benefit plans that apply, if they do agree to be leased.

HB 1070 ensures that dentists and patients alike get more clarity and understanding of dental benefits, and ensures that dentists are informed about and consent to any dental benefit plan that they will be a part of.

Thank you to Senator Jodeh and Senator Frizell for bringing this important legislation forward, and I urge you to support House Bill 1070.

Thank you,
Lori Trembath, D.D.S.

Senate Health & Human Services

03/19/2026 01:30 PM

HB26-1070 Third-Party Network Agreements for Dental Services

Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
<p>Alyssa Aberle For Colorado Dental Hygienists Association</p>	<p>My name is Alyssa Aberle, I am a licensed Registered Dental Hygienist and Past President of the Colorado Dental Hygienistsâ€™ Association (CODHA). We are writing in strong support of HB26-1070, a bipartisan, common-sense patient protection and provider fairness bill.</p> <p>This bill ensures that no dental providerâ€™s services or agreed-upon discounts can be leased or accessed without the providerâ€™s affirmative consent - written, clear, intentional consent.</p> <p>CODHA stands with the Colorado Dental Association in supporting this bill because it protects the integrity of dental practice networks and empowers providers to make the best decisions for their patients and business.</p> <p>Colorado has proudly permitted dental hygienists to own and operate independent dental hygiene practices for 40 years, since 1986. These are small business practices, credentialed with insurance companies and providing essential preventive and therapeutic services directly to their communities. They create jobs, broaden access to care, and increase oral health equity across Colorado.</p> <p>HB1070 supports that small business foundation. As a dental hygienist who used to work for a school-based dental program in Colorado, we continually saw actions at the state and local level to ensure that the programs were opt IN programs, not opt OUT. We understand that patients should have autonomy over whether or not</p>

	<p>to participate in school programs and explicitly consent to services provided in schools.</p> <p>This same principle should apply to dental providers. Third party payer contracts are lengthy and often written in legal language that dental providers may not be well versed in. It should be the right of the dental provider to have clarity over what they are signing up for and what will be expected of them as part of this contract. Providers deserve agency over who can represent their services and discounts - especially when those decisions impact patient access, continuity of care, and practice viability.</p> <p>Sustainable, locally owned dental and dental hygiene practices are good for Colorado’s health and good for Colorado’s economy.</p> <p>For those reasons, we strongly urge a Yes vote on HB26-1070.</p>
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