First Regular Session Seventy-first General Assembly STATE OF COLORADO

REREVISED

This Version Includes All Amendments Adopted in the Second House SENATE BILL 17-300

LLS NO. 17-0871.02 Christy Chase x2008

SENATE SPONSORSHIP

Lambert,

Kennedy,

HOUSE SPONSORSHIP

Senate Committees Health & Human Services

House Committees Health, Insurance, & Environment

A BILL FOR AN ACT

| 101 | CONCERNING THE AUTHORITY OF THE COMMISSIONER OF INSURANCE |
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| 102 | TO IMPLEMENT PROGRAMS TO ADDRESS THE RISING COSTS OF |
| 103 | PROVIDING HEALTH CARE COVERAGE TO HIGH-RISK |
| 104 | INDIVIDUALS IN THE <u>STATE, AND, IN CONNECTION THEREWITH,</u> |
| 105 | DIRECTING THE COMMISSIONER TO STUDY ISSUES RELATED TO |
| 106 | THE IMPLEMENTATION OF SUCH PROGRAMS. |

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <u>http://leg.colorado.gov</u>.)

The bill authorizes the commissioner of insurance to:

Amended 2nd Reading May 9, 2017

HOUSE

HOUSE Amended 3rd Reading May 10, 2017



| | Develop a high-risk health care coverage program to address access to coverage for individuals with high-cost medical conditions and to reduce health insurance premiums; Apply for a waiver under federal law to implement the program; Seek, accept, and expend public and private gifts, grants, and donations to implement the bill. |
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| 1 | Be it enacted by the General Assembly of the State of Colorado: |
| 2 | SECTION 1. In Colorado Revised Statutes, add article 22.5 to |
| 3 | title 10 as follows: |
| 4 | <u>ARTICLE 22.5</u> |
| 5 | <u>Colorado High-risk Health Care Coverage Study</u> |
| 6 | 10-22.5-101. Short title. THE SHORT TITLE OF THIS ARTICLE 22.5 |
| 7 | IS THE "COLORADO HIGH-RISK HEALTH CARE COVERAGE STUDY ACT". |
| 8 | 10-22.5-102. Legislative declaration. The GENERAL ASSEMBLY |
| 9 | HEREBY DECLARES THAT, WITH RISING RATES IN THE INDIVIDUAL HEALTH |
| 10 | INSURANCE MARKET AND THE CHALLENGES FACED BY CARRIERS IN |
| 11 | ANTICIPATING COSTS OF CARE FOR INDIVIDUALS WHO ARE CONSIDERED |
| 12 | HIGH RISK DUE TO A MEDICAL CONDITION, IT IS IMPORTANT FOR |
| 13 | COLORADO TO EXPLORE INNOVATIVE WAYS TO REDUCE COSTS WHILE |
| 14 | MAINTAINING ACCESS TO CARE. ACCORDINGLY, THE PURPOSE OF THIS |
| 15 | ARTICLE 22.5 IS TO AUTHORIZE THE COMMISSIONER OF INSURANCE AND |
| 16 | THE DIVISION OF INSURANCE TO STUDY NEW POLICY SOLUTIONS THAT MAY |
| 17 | INVOLVE APPLYING FOR AUTHORIZATION OR WAIVERS AVAILABLE UNDER |
| 18 | FEDERAL LAW. |
| 19 | 10-22.5-103. Definitions. As used in this article 22.5, unless |
| 20 | THE CONTEXT OTHERWISE REQUIRES: |
| 21 | (1) "CARRIER" HAS THE SAME MEANING AS SET FORTH IN SECTION |

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1 <u>10-16-102 (8).</u>

| 1 | <u>10-10-102 (8).</u> |
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| 2 | (2) "COMMISSIONER" MEANS THE COMMISSIONER OF INSURANCE |
| 3 | OR THE COMMISSIONER'S DESIGNEE. |
| 4 | (3) "DIVISION" MEANS THE DIVISION OF INSURANCE ESTABLISHED |
| 5 | <u>IN SECTION 10-1-103.</u> |
| 6 | (4) "Federal act" means the "Patient Protection and |
| 7 | AFFORDABLE CARE ACT", PUB.L. 111-148, AS AMENDED BY THE "HEALTH |
| 8 | CARE AND EDUCATION RECONCILIATION ACT OF 2010", PUB.L. 111-152, |
| 9 | AND AS MAY BE FURTHER AMENDED, AND INCLUDING ANY FEDERAL |
| 10 | REGULATIONS ADOPTED UNDER THE FEDERAL ACT. |
| 11 | (5) "High-risk individual" means an individual who has a |
| 12 | MEDICAL CONDITION THAT IS LIKELY TO RESULT IN HIGH HEALTH CARE |
| 13 | <u>COSTS.</u> |
| 14 | (6) "REINSURANCE" MEANS A SYSTEM IN WHICH A CARRIER MAY |
| 15 | ARRANGE WITH ANOTHER ENTITY FOR PAYMENT OF SERVICES FOR |
| 16 | HIGH-RISK INDIVIDUALS ENROLLED IN THE CARRIER'S HEALTH PLAN, AND |
| 17 | IN WHICH ALL COVERED PERSONS, HEALTHY AND SICK, ARE IN A SINGLE |
| 18 | POOL AND HAVE THE SAME CHOICE OF HEALTH PLANS. |
| 19 | <u>10-22.5-104. High-risk health care coverage study -</u> |
| 20 | commissioner to conduct - report. (1) THE COMMISSIONER SHALL |
| 21 | STUDY METHODS OF PROVIDING HEALTH CARE COVERAGE TO HIGH-RISK |
| 22 | INDIVIDUALS AND REDUCING HEALTH INSURANCE PREMIUMS IN THE |
| 23 | INDIVIDUAL MARKET. IN CONDUCTING THE STUDY, THE COMMISSIONER |
| 24 | AND THE DIVISION SHALL ENGAGE WITH AND SEEK ONGOING INPUT FROM |
| 25 | CARRIERS, CONSUMER GROUPS, AND OTHER INTERESTED STAKEHOLDERS. |
| 26 | (2) AS PART OF THE STUDY, THE COMMISSIONER SHALL EXPLORE |
| 27 | THE FEASIBILITY OF MAINTAINING HEALTH CARE COVERAGE FOR HIGH-RISK |

| 1 | INDIVIDUALS AND REDUCING PREMIUMS THROUGH A REINSURANCE |
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| 2 | PROGRAM OR OTHER HIGH-RISK PROGRAMS AND SHALL TAKE INTO |
| 3 | CONSIDERATION: |
| 4 | (a) ANY REQUIREMENTS IMPOSED UNDER THE FEDERAL ACT OR |
| 5 | OTHER APPLICABLE FEDERAL LAWS AND REGULATIONS TO QUALIFY FOR |
| 6 | FEDERAL FINANCIAL SUPPORT; |
| 7 | (b) POTENTIAL FINANCIAL IMPACTS TO CONSUMERS AND THE |
| 8 | BUSINESS COMMUNITY; |
| 9 | (c) POTENTIAL FUNDING MECHANISMS AND OTHER MEASURES TO |
| 10 | ENSURE THE LONG-TERM FINANCIAL SUSTAINABILITY OF A HIGH-RISK OR |
| 11 | REINSURANCE PROGRAM; AND |
| 12 | (d) The necessary procedural requirements that the state |
| 13 | MUST FULFILL IN ORDER TO APPLY FOR AND SEEK APPROVAL OF ANY |
| 14 | WAIVER OR OTHER AUTHORIZATION THAT MAY BE REQUIRED UNDER THE |
| 15 | FEDERAL ACT OR OTHER APPLICABLE FEDERAL LAW. |
| 16 | (3) (a) UPON COMPLETION OF THE STUDY, THE COMMISSIONER |
| 17 | SHALL SUBMIT A REPORT ON THE STUDY TO THE JOINT BUDGET COMMITTEE |
| 18 | OF THE GENERAL ASSEMBLY, THE HEALTH AND HUMAN SERVICES |
| 19 | COMMITTEE OF THE SENATE, AND THE HEALTH, INSURANCE, AND |
| 20 | ENVIRONMENT COMMITTEE OF THE HOUSE OF REPRESENTATIVES, OR THEIR |
| 21 | SUCCESSOR COMMITTEES, BY OCTOBER 1, 2017, WHICH REPORT MAY BE |
| 22 | considered, as necessary, in the budgeting process. The |
| 23 | COMMISSIONER SHALL REPORT, AT A MINIMUM, ON THE AREAS INCLUDED |
| 24 | IN THE STUDY, AS SPECIFIED IN SUBSECTION (2) OF THIS SECTION. |
| 25 | (b) IN ADDITION TO SUBMITTING THE REPORT AS REQUIRED BY THIS |
| 26 | SUBSECTION (3), THE COMMISSIONER SHALL PRESENT THE REPORT TO THE |
| 27 | HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE AND THE |

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| 1 | HEALTH, INSURANCE, AND ENVIRONMENT COMMITTEE OF THE HOUSE OF |
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| 2 | REPRESENTATIVES, OR THEIR SUCCESSOR COMMITTEES, DURING THE |
| 3 | <u>COMMITTEES' HEARINGS HELD PRIOR TO THE 2018 REGULAR SESSION</u> |
| 4 | UNDER THE "STATE MEASUREMENT FOR ACCOUNTABLE, RESPONSIVE, |
| 5 | AND TRANSPARENT (SMART) GOVERNMENT ACT", PART 2 OF ARTICLE 7 |
| 6 | <u>OF TITLE 2.</u> |
| 7 | <u>10-22.5-105. Gifts, grants, donations, and federal funding -</u> |
| 8 | authority to accept and expend. THE COMMISSIONER MAY SEEK, ACCEPT, |
| 9 | AND EXPEND GIFTS, GRANTS, DONATIONS FROM PRIVATE OR PUBLIC |
| 10 | SOURCES OR ANY FEDERAL FUNDING TO DEFRAY THE COSTS OF |
| 11 | CONDUCTING THE STUDY PURSUANT TO SECTION 10-22.5-104. |
| 12 | 10-22.5-106. Repeal. This article is repealed, effective June |
| 13 | <u>30, 2018.</u> |
| 14 | SECTION 2. Act subject to petition - effective date. This act |
| 15 | takes effect at 12:01 a.m. on the day following the expiration of the |
| 16 | ninety-day period after final adjournment of the general assembly (August |
| 17 | 9, 2017, if adjournment sine die is on May 10, 2017); except that, if a |
| 18 | referendum petition is filed pursuant to section 1 (3) of article V of the |
| 19 | state constitution against this act or an item, section, or part of this act |
| 20 | within such period, then the act, item, section, or part will not take effect |
| 21 | unless approved by the people at the general election to be held in |
| 22 | November 2018 and, in such case, will take effect on the date of the |
| 23 | official declaration of the vote thereon by the governor. |