

LEGISLATION THAT FAILED

Colorado Coalition for the Medically Underserved

HB1097	ALTERNATIVE MEDICAID PROGRAM FOR ELDERLY
	Rep. Acree Creates an alternative medical assistance program for the Medicaid-eligible elderly. Requires the program to provide an eligible participant, defined as a person 55 years of age or older who voluntarily participates in the program and agrees to have a fiduciary that is not part of the participant's estate, an amount equal to 70% of the medical assistance benefits that he or she would have received if the participant were enrolled in the state's traditional Medicaid program. Allows flexibility in the choice of providers and requires the state to waive all estate recovery requirements. Allows an eligible participant to use such moneys to purchase long-term care services, assisted living services, home- and community-based services, home health services, prescribed drugs, or any health or dental care service from any provider in the state. Requires an annual redetermination of the participant's eligibility for services by the department of health care policy and financing and an annual reassessment by the participant's physician of the level of care that the participant needs. Requires the department of health care policy and financing to seek federal authorization for the program. Repeals the program effective July 1, 2013 if the federal government denies the waiver and the director files written notice with the revisor of statutes.
Position	Monitor
Current Status	Postponed Indefinitely
HB1116	CHILDREN'S DENTAL PROGRAM MONEYS
	Rep. Frangas & Sen. Hudak Repeals the intent of the general assembly that general fund moneys not be used to implement the children's dental assistance program. Allows the children's dental plan cash fund to include general fund appropriations, but not in FY09-10.
Position	Support
Current Status	Postponed Indefinitely
HB1226	NO-FAULT MOTOR VEHICLE INSURANCE ACT
	Rep. McGihon & Sen. M Carroll reauthorizes no fault auto insurance
Position	Pending review
Current Status	Postponed Indefinitely

LEGISLATION THAT FAILED

HB1256 **INTERSTATE HEALTH INSURANCE PURCHASE**

Rep. Acree

Authorizes the commissioner of insurance , on behalf of the state, to enter into multistate agreements with other states for the purpose of allowing a health coverage issuer doing business in another state to offer, sell, or issue in Colorado an individual health coverage plan that is regulated by another state. Requires the commissioner, in making the determination to enter into a multistate agreement, to consider whether consumers in Colorado will have access to an adequate network of providers through a plan provided by an out-of-state issuer. Specifies which state's laws would apply to a plan offered in Colorado by an out-of-state issuer and which state is responsible for enforcement of the applicable laws. Requires the issuer to provide Colorado consumers a notice regarding the effects of purchasing a plan from an out-of-state issuer. Authorizes the commissioner to adopt rules necessary to implement the act.

Position Oppose

Current Status Postponed Indefinitely

HB1273 **HEALTH CARE FOR COLORADO**

Rep. Kefalas & Sen. Foster

Creates the Colorado health care authority as a body corporate and political subdivision of the state. Identifies members of the committee to be appointed by legislative leadership and the Governor. Establishes the mission of the authority, which is to create a health care system in Colorado that is the administrator and payer for health care services. Requires the authority to create a system to recommend to the General Assembly that provides comprehensive medical benefits to Coloradans. Requires the appointment of a board of directors to create and develop the health care systems. In creating and developing the system, requires the board to consider specific requirements and analyses. Specifies comprehensive medical benefits to be included in the system. Establishes a fund consisting of any general fund moneys appropriated. Requires the Executive Director of the authority to seek all necessary waivers, exemptions, and agreements from the federal government to ensure consistent levels of funding if the system is implemented by bill of the General Assembly. Prohibits the implementation of the creation and development of the system if the board does not raise sufficient gifts, grants, and donations by July 1, 2011, to fund its activities. Prohibits the implementation of the system until all necessary waivers, exemptions, and agreements are in place; the board certifies that the board has received sufficient funding; and the General Assembly acts by bill to implement the system.

Position Monitor

Current Status Lost

LEGISLATION THAT FAILED

HB1278 **CARE FOR VULNERABLE POPULATIONS**

Rep. Frangas

Sections 1 and 2. Subject to available appropriations, authorizes the department of health care policy and financing (department) to increase the federal poverty level for persons eligible for the children's basic health plan to the maximum permitted by federal law. Sections 3 through 9. Subject to the receipt of sufficient gifts, grants, or donations, directs the department to establish a state navigator position to assist medicare clients in identifying and evaluating available programs. Makes conforming amendments. Section 10. To the extent authorized by a new federal law, expands eligibility for medicaid to persons who are involuntarily unemployed. Section 11. Provides that an administrative law judge shall award a recipient his or her reasonable attorney fees if he or she is substantially successful in an appeal. Sections 12 and 13. In developing memorandums of understanding for agencies providing services to families and children, encourages the input of family members and family organizations. Defines family members and family organizations. Section 14. Authorizes the department of public health and environment to seek and accept moneys and grants to prevent chronic diseases and to increase immunizations. Section 15. Subject to the receipt of sufficient gifts, grants, and donations, authorizes the commissioner of insurance to appoint one or more physician's advocates to make recommendations to the division of insurance when an insurance carrier denies a treatment as not being medically necessary. Grants immunity to physician's advocates who make the recommendations. Sections 16 through 21. Requires home care placement agencies to be licensed by the department of public health and environment. Authorizes the state board of health to establish minimum standards for home care placement agencies. Penalizes home care placement agencies for failure to comply with the licensing requirements or standards.

Position Pending review
Current Status Postponed Indefinitely

HB1358 **CREATE HEALTH CARE SYSTEM FOR COLORADO**

Rep. Rice

Creates the Colorado health care authority (authority) as a body corporate and political subdivision of the state. Establishes the mission of the authority, which is to create a health care system (system) in Colorado that is the administrator and payer for health care services. Requires the authority to design a system to recommend to the general assembly that provides comprehensive medical benefits to all Coloradans. Requires the appointment of a board of directors (board) to create and develop the system. In creating and developing the system, requires the board to consider specific requirements and analyses. Requires the executive director of the board to seek all necessary waivers, exemptions, and agreements from the federal government to ensure consistent levels of funding if the system is implemented by bill of the general assembly. Prohibits the implementation of the creation and development of the system if the board does not raise sufficient gifts, grants, and donations by July 1, 2011, to fund its activities. Prohibits the implementation of the system until all necessary waivers, exemptions, and agreements are in place and the general assembly acts by bill to implement the system.

Position Oppose
Current Status Postponed Indefinitely

LEGISLATION THAT FAILED

SB009	DENTAL SERVICE FOR MEDICAID AND CHIP CLIENTS
	Sen. Boyd & Rep. Massey Health Care Task Force. Adds adult dental services to optional services provided under the "Colorado Medical Assistance Act". Allows the medical services board to adopt rules specifying the particular dental services that will be provided. Adds dental services to prenatal and postpartum care for pregnant women under the "Children's Basic Health Plan Act".
Position	Support
Current Status	Postponed Indefinitely

SB102	MEDICAL BENEFITS IF EMPLOYER INSURED
	Sen. Brophy Prohibits a person from being eligible for Medicaid or children's basic health plan if the person is eligible for coverage by a comparable insurance plan through an employer and the employer contributes at least 50% of the premium cost.
Position	Oppose
Current Status	Postponed Indefinitely

SB159	DEPENDENT HEALTH CARE COVERAGE
	Sen. Sandoval & Reps. MhGihon and Benefield Changes the age of an individual for which a carrier is required to offer dependent coverage for an additional premium from 25 to 30.
Position	Support
Current Status	Postponed Indefinitely

SB166	PRESCRIPTION DRUGS ETHICS ACT
	Sen. M. Carroll & Rep. Pace Creates the "Prescription Drug Ethics Act". Prohibits a manufacturer or wholesale drug, biological product, or medical or surgical device distributor who participates in a state health program from offering a gift, fee, payment, subsidy, or other economic benefit to a health care practitioner. Creates exemptions. Requires each manufacturer or distributor to disclose to the state board of pharmacy (board) the value of any benefit provided to any health care practitioner, hospital, nursing home, pharmacist, health benefit plan administrator, or any other person authorized to prescribe, dispense, or purchase at wholesale prescription drugs, biological products, or medical or surgical devices. Requires the board to make the reported information available on its web site. Requires each manufacturer or distributor that participates in a state health program to submit a report containing advertising and marketing expenditures to the board. Requires the board to make an annual report to the general assembly. Requires a health care practitioner, health plan, hospital, or other institution that receives any type of funding or payment from the state to exclude any person with a financial interest in a manufacturer from participating in decisions that influence the wholesale purchasing of prescription drugs. Allows the attorney general to bring action and impose a penalty. Grants rule-making authority to the board. Prohibits a person from knowingly disclosing or using records that include prescription information containing individual identifying information in order to market a prescribed product. Creates a penalty for disclosing an individual's prescription information containing individual identifying information. Creates the prescription drug ethics cash fund to consist of fees and gifts, grants, and donations collected by the board for the purposes of the "Prescription Drug Ethics Act".
Position	Pending review
Current Status	Postponed Indefinitely

LEGISLATION THAT FAILED

SB250	COVERAGE FOR ORAL CANCER MEDICATION
	Sen. Tochtrop & Rep. Primavera
	Requires a health benefit plan that covers cancer chemotherapy treatment to provide coverage for prescribed, orally administered anticancer medication.
Position	Monitor
Current Status	Postponed Indefinitely