

SB061\_L.009

## SENATE COMMITTEE OF REFERENCE REPORT

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Chairman of Committee

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Date
Committee on Health and Human Services.

After consideration on the merits, the Committee recommends the following:

SB09-061 be amended as follows:

1 Amend printed bill, page 2, line 11, after "SPECIALTIES", insert "OR  
2 APPROPRIATE LEVEL II ACCREDITATION".

3 Page 3, line 27, after "ARTICLE", insert "THAT INVOLVES A DECISION  
4 ABOUT TREATMENT THAT IS WITHIN THE SCOPE OF PRACTICE OF A HEALTH  
5 CARE PROFESSION LICENSED, CERTIFIED, REGISTERED, OR OTHERWISE  
6 REGULATED BY THE STATE PURSUANT TO TITLE 12, C.R.S.".

7 Page 4, line 3, after "REVIEWED.", add "IN THE ALTERNATIVE, A  
8 COLORADO-LICENSED HEALTH CARE PROFESSIONAL WHO LACKS THE  
9 APPROPRIATE EXPERTISE MAY PERFORM THE UTILIZATION REVIEW IF HE OR  
10 SHE CONSULTS OR CONFERS WITH A COLORADO-LICENSED HEALTH CARE  
11 PROFESSIONAL WHO HAS THE APPROPRIATE EXPERTISE IN THE SAME OR  
12 SIMILAR SPECIALTIES AS WOULD TYPICALLY MANAGE THE CASE BEING  
13 REVIEWED. IF A COLORADO-LICENSED HEALTH CARE PROFESSIONAL WITH  
14 APPROPRIATE EXPERTISE IS NOT AVAILABLE TO PERFORM THE UTILIZATION  
15 REVIEW OR TO CONSULT OR CONFER WITH THE REVIEWER, THE PRIVATE  
16 UTILIZATION ORGANIZATION MAY USE A HEALTH CARE PROFESSIONAL WHO  
17 IS LICENSED IN GOOD STANDING IN ANOTHER STATE AND HAS THE  
18 APPROPRIATE EXPERTISE TO PERFORM THE UTILIZATION REVIEW IF SUCH  
19 HEALTH CARE PROFESSIONAL AGREES TO BE SUBJECT TO THE JURISDICTION  
20 AND DISCIPLINARY AUTHORITY OF THE STATE BOARD OF MEDICAL  
21 EXAMINERS PURSUANT TO ARTICLE 36 OF TITLE 12, C.R.S., OR OTHER  
22 APPROPRIATE STATE BOARD THAT REGULATES THE PROFESSION IN WHICH  
23 THE HEALTH CARE PROFESSIONAL IS ENGAGED.";



- 1 line 10, strike "OR APPEALING THE DENIAL" and substitute "AND  
2 CONSIDERING ELIGIBILITY FOR PAYMENT";
- 3 line 13, strike "OR APPEAL IS" and substitute "AND CONSIDERATION ARE";
- 4 line 17, after "REVIEWED.", add "If A COLORADO-LICENSED HEALTH CARE  
5 PROFESSIONAL WITH APPROPRIATE EXPERTISE IS NOT AVAILABLE TO  
6 PERFORM THE REVIEW AND CONSIDERATION, THE INSURER MAY USE A  
7 HEALTH CARE PROFESSIONAL WHO IS LICENSED IN GOOD STANDING IN  
8 ANOTHER STATE AND HAS THE APPROPRIATE EXPERTISE TO PERFORM THE  
9 REVIEW AND CONSIDERATION IF SUCH HEALTH CARE PROFESSIONAL  
10 AGREES TO BE SUBJECT TO THE JURISDICTION AND DISCIPLINARY  
11 AUTHORITY OF THE STATE BOARD OF MEDICAL EXAMINERS PURSUANT TO  
12 ARTICLE 36 OF TITLE 12, C.R.S., OR OTHER APPROPRIATE STATE BOARD  
13 THAT REGULATES THE PROFESSION IN WHICH THE HEALTH CARE  
14 PROFESSIONAL IS ENGAGED.";
- 15 after line 21, insert the following:
- 16 "SECTION 6. 10-16-102 (22.5), Colorado Revised Statutes, is  
17 amended to read:
- 18 **10-16-102. Definitions.** As used in this article, unless the context  
19 otherwise requires:
- 20 (22.5) "Health coverage plan" means a policy, contract, certificate,  
21 or agreement entered into by, offered to, or issued by a carrier to provide,  
22 deliver, arrange for, pay for, or reimburse any of the costs of health care  
23 services. "HEALTH COVERAGE PLAN" INCLUDES A PLAN THAT PROVIDES  
24 BENEFITS FOR DISABILITY INCOME.".
- 25 Renumber succeeding sections accordingly.
- 26 Page 5, line 1, after "ORGANIZATION", insert "THAT INVOLVES A DECISION  
27 ABOUT TREATMENT THAT IS WITHIN THE SCOPE OF PRACTICE OF A HEALTH  
28 CARE PROFESSION LICENSED, CERTIFIED, REGISTERED, OR OTHERWISE  
29 REGULATED BY THE STATE PURSUANT TO TITLE 12, C.R.S.";
- 30 strike line 2 and substitute the following:
- 31 "CONDUCTED BY AT LEAST ONE HEALTH CARE PROFESSIONAL WHO IS";



- 1 line 3, strike "HAVE" and substitute "HAS";
- 2 line 5, after "REVIEWED.", add "IN THE ALTERNATIVE, A  
3 COLORADO-LICENSED HEALTH CARE PROFESSIONAL WHO LACKS THE  
4 APPROPRIATE EXPERTISE MAY PERFORM THE UTILIZATION REVIEW IF HE OR  
5 SHE CONSULTS OR CONFERS WITH A COLORADO-LICENSED HEALTH CARE  
6 PROFESSIONAL WHO HAS THE APPROPRIATE EXPERTISE IN THE SAME OR  
7 SIMILAR SPECIALTIES AS WOULD TYPICALLY MANAGE THE CASE BEING  
8 REVIEWED. IF A COLORADO-LICENSED HEALTH CARE PROFESSIONAL WITH  
9 APPROPRIATE EXPERTISE IS NOT AVAILABLE TO PERFORM THE UTILIZATION  
10 REVIEW OR TO CONSULT OR CONFER WITH THE REVIEWER, THE PRIVATE  
11 UTILIZATION ORGANIZATION MAY USE A HEALTH CARE PROFESSIONAL WHO  
12 IS LICENSED IN GOOD STANDING IN ANOTHER STATE AND HAS THE  
13 APPROPRIATE EXPERTISE TO PERFORM THE UTILIZATION REVIEW IF SUCH  
14 HEALTH CARE PROFESSIONAL AGREES TO BE SUBJECT TO THE JURISDICTION  
15 AND DISCIPLINARY AUTHORITY OF THE STATE BOARD OF MEDICAL  
16 EXAMINERS PURSUANT TO ARTICLE 36 OF TITLE 12, C.R.S., OR OTHER  
17 APPROPRIATE STATE BOARD THAT REGULATES THE PROFESSION IN WHICH  
18 THE HEALTH CARE PROFESSIONAL IS ENGAGED.";
- 19 line 13, strike "DENIAL," and substitute "DENIAL OR IN A LETTER  
20 ACCOMPANYING THE WRITTEN DENIAL,";
- 21 line 14, after "BASED.", add "THE PLAN MAY SATISFY THE IDENTIFICATION  
22 REQUIREMENT BY PROVIDING THE ELECTRONIC SIGNATURE OF THE HEALTH  
23 CARE PROFESSIONAL.".
- 24 Page 6, line 23, after "(8)", insert "(a)";
- 25 line 27, strike "(a)" and substitute "(I)".
- 26 Page 7, line 1, strike "(b)" and substitute "(II)";
- 27 line 2, strike "REVIEWED." and substitute "REVIEWED, OR, IN THE  
28 ALTERNATIVE, SHALL CONSULT OR CONFER WITH A COLORADO-LICENSED  
29 PHYSICIAN, DENTIST, OR HEALTH CARE PROFESSIONAL WHO HAS THE  
30 APPROPRIATE EXPERTISE IN THE SAME OR SIMILAR SPECIALTIES AS WOULD  
31 TYPICALLY MANAGE THE CASE BEING REVIEWED.";
- 32 after line 2, insert the following:

1           "(b) NOTWITHSTANDING PARAGRAPH (a) OF THIS SUBSECTION (8)  
2   OR ANY OTHER PROVISION OF THIS SECTION TO THE CONTRARY, IF A  
3   COLORADO-LICENSED PHYSICIAN, DENTIST, OR HEALTH CARE  
4   PROFESSIONAL WITH THE APPROPRIATE EXPERTISE IS NOT AVAILABLE TO  
5   MAKE A RECOMMENDATION ON A REQUEST FOR COVERED BENEFITS,  
6   EVALUATE A FIRST-LEVEL APPEAL, REVIEW A SECOND-LEVEL APPEAL, OR  
7   CONSULT OR CONFER ON A REQUEST FOR COVERED BENEFITS OR A FIRST-  
8   OR SECOND-LEVEL APPEAL PURSUANT TO THIS SECTION, THE HEALTH  
9   COVERAGE PLAN MAY USE A PHYSICIAN, DENTIST, OR HEALTH CARE  
10   PROFESSIONAL WHO IS LICENSED IN GOOD STANDING IN ANOTHER STATE  
11   AND HAS THE APPROPRIATE EXPERTISE TO MAKE THE RECOMMENDATION  
12   OR EVALUATE OR REVIEW THE APPEAL IF SUCH PHYSICIAN, DENTIST, OR  
13   HEALTH CARE PROFESSIONAL AGREES TO BE SUBJECT TO THE JURISDICTION  
14   AND DISCIPLINARY AUTHORITY OF THE STATE BOARD THAT REGULATES  
15   THE APPLICABLE PROFESSION IN THIS STATE.";

16   line 3, strike "(2) (c) (II) (B) and";

17   line 4, strike "are" and substitute "is";

18   strike lines 6 through 13 and substitute the following:

19   **"legislative declaration - definitions.** (5) Upon receipt of a request  
20   from a covered person INDIVIDUAL";

21   after line 18, insert the following:

22           **"SECTION 10.** 10-16-602 (2), Colorado Revised Statutes, is  
23   amended to read:

24           **10-16-602. Definitions.** As used in this part 6, unless the context  
25   otherwise requires:

26           (2) "Insurer" means a sickness and accident insurer and any health  
27   maintenance organization; fraternal benefit society; nonprofit hospital,  
28   medical-surgical, and health services corporation; prepaid health plans;  
29   or other entity providing health care coverage or health benefits or health  
30   care services, whether as a principal, indemnitor, surety, or contractor,  
31   authorized by the commissioner to conduct business in Colorado.  
32   "Insurer" also includes a self-insurer providing any health coverage or  
33   health benefit or health care services certificate, agreement, contract,

- 1 policy, or plan; except that the term "insurer" under this part 6 shall apply
- 2 only to this part 6 and shall not include an insurer or self-insured
- 3 employer under articles 40 to 47 of title 8, C.R.S. "INSURER" ALSO
- 4 INCLUDES AN INSURER PROVIDING BENEFITS FOR DISABILITY INCOME."
- 5 Renumber succeeding sections accordingly.

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