

## HB-1163 – Klingenschmitt

Title: Concerning the repeal of Certain Provision of the “Colorado Health Care Coverage Act” Contingent on the Repeal of Comparable Federal Law Provisions

Concerns: When drafting and enacting HB13-1266 to align state health insurance laws with requirements of the “Patient Protection and Affordable Care Act” (ACA), the intent was to harmonize or align provisions of state and federal law so that there would be a single set of rules for carriers, consumers and providers to meet. In several instances, there were existing Colorado statutes which were adopted prior to the ACA and which set similar requirements, but were modified to be in accord with the federal requirements of the ACA. There is concern that inserting an automatic repeal of these provisions would not return Colorado law to what existed prior to the ACA, but would remove these provisions from Colorado law entirely. Among the provisions in HB15-1163 that fall into the category of prior Colorado law are:

- CRS 10-16-104.3 (page 3, lines 2 to 9 of the bill) – Prior to the ACA, Colorado required coverage to age 25 under HB05-1101 for all individual and group plans. [2013 – CRS 10-16-104.3]
- CRS 10-16-105 (page 3, lines 12 to 20 of the bill) – Guaranteed issue was required for small group plans via SB05-235. [2013 – CRS 10-16-105]
- CRS 10-16-105.1 (page 3, line 23 to page 4, line 3 of the bill) – Colorado law which existed prior to 1997 and was amended in 1997 to comply with the federal Health Insurance Portability and Accountability Act (HIPAA). [2013 – CRS 10-16-201.5]]
- CRS 10-16-107.7 (page 4, lines 16 to 22 of the bill) -- Prior Colorado law under CRS 10-16-104(7), with similar requirements, has been in effect since prior to recodification of the entire set of health insurance statutes in 1992. [2013 – CRS 10-16-104(7)]
- CRS 10-16-108 (page 4, line 25 to page 5, line 4 of the bill) – There has been some type of continuation/conversion coverage on the books in Colorado since 1986. [2013 – CRS 10-16-108]
- CRS 10-16-108.5 (page 5, lines 7 to 13) – Colorado has required a health benefit plan description form since 1997. [2013 – CRS 10-16-108.5(11)]
- CRS 10-16-113 (page 5, line 24 to page 6, line 3) – Colorado’s appeal process was first enacted in HB 97-1161 and evolved over the years to have most of the same requirements as under the ACA. Repealing all requirements from CRS 10-16-113 would leave Colorado consumers without a needed appeal process. [2013 – CRS 10-16-113]
- CRS 10-16-118 (page 6, lines 6 to 15 of the bill) – Colorado had prior small group protections related to pre-existing conditions enacted beginning in 1997 to comply with HIPAA. [CRS 10-16-107(7.5)]
- CRS 10-16-140 (page 6, lines 18 to 24 of the bill) – Grace periods, of varying lengths from 7 to 31 days for individual policies and 31 days for group policies, have been in place since 1992 or before. [2013 – CRS 10-16-202(4) and 10-16-214(3)].