

HB1029_L.003

HOUSE COMMITTEE OF REFERENCE AMENDMENT

Committee on Health, Insurance, & Environment.HB15-1029 be amended as follows:

1 Amend proposed committee amendment (HB1029_L.001), page 4, line
 2 11, strike "TELEHEALTH." and substitute "TELEHEALTH, AS DEFINED IN
 3 SECTION 10-16-123 (4) (e).

4 **SECTION 3.** In Colorado Revised Statutes, 10-16-704, **amend**
 5 (1) (a), (9) (a.5), and (11) as follows:

6 **10-16-704. Network adequacy - rules - legislative declaration.**

7 (1) A carrier providing a managed care plan shall maintain a network that
 8 is sufficient in numbers and types of providers to assure that all covered
 9 benefits to covered persons will be accessible without unreasonable delay.
 10 In the case of emergency services, covered persons shall have access to
 11 health care services twenty-four hours per day, seven days per week.
 12 Sufficiency shall be determined in accordance with the requirements of
 13 this section and may be established by reference to any reasonable criteria
 14 used by the carrier, including but not limited to:

15 (a) Provider-covered person ratios by specialty, which may
 16 include the use of providers through ~~telemedicine~~ TELEHEALTH for
 17 services that may appropriately be provided through ~~telemedicine~~
 18 TELEHEALTH;

19 (9) Beginning January 1, 1998, a carrier shall maintain and make
 20 available upon request of the commissioner, the executive director of the
 21 department of public health and environment, or the executive director of
 22 the department of health care policy and financing, in a manner and form
 23 that reflects the requirements specified in paragraphs (a) to (k) of this
 24 subsection (9), an access plan for each managed care network that the
 25 carrier offers in this state. The carrier shall make the access plans, absent
 26 confidential information as specified in section 24-72-204 (3), C.R.S.,
 27 available on its business premises and shall provide them to any interested
 28 party upon request. In addition, all health benefit plans and marketing
 29 materials shall clearly disclose the existence and availability of the access
 30 plan. All rights and responsibilities of the covered person under the health
 31 benefit plan, however, shall be included in the contract provisions,
 32 regardless of whether or not such provisions are also specified in the
 33 access plan. The carrier shall prepare an access plan prior to offering a
 34 new managed care network and shall update an existing access plan
 35 whenever the carrier makes any material change to an existing managed
 36 care network, but not less than annually. The access plan of a carrier
 37 offering a managed care plan shall demonstrate the following:

38 (a.5) An adequate number of accessible specialists and



1 sub-specialists within a reasonable distance or travel time, or both, or who
2 may be available through the use of ~~telemedicine~~ TELEHEALTH;

3 (11) The division of insurance, in cooperation with the chief
4 medical officer for the state, shall evaluate a carrier's network adequacy
5 plan concerning the use of ~~telemedicine~~ TELEHEALTH for providers who
6 are specialists and sub-specialists for rural areas. ~~Such~~ THE DIVISION AND
7 CHIEF MEDICAL OFFICER SHALL CONDUCT THE review ~~shall occur~~ in a
8 timely fashion so as not to delay access to health care services."."

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