HOUSE JOURNAL

SEVENTIETH GENERAL ASSEMBLY STATE OF COLORADO

First Regular Session

Seventeenth Legislative Day

Friday, January 23, 2015

1 2	Prayer by the Reverend Brad Laurvick, Highlands United Methodist Church, Denver.
3 4	The Speaker called the House to order at 9:00 a.m.
5 6 7	Pledge of Allegiance led by Sterling Volz, Marley Volz, Most Precious Blood Catholic School, Denver.
8	The roll was called with the following result:
10 12 13 14	Present61. ExcusedRepresentative(s) Jon Becker, Conti, Priola, Rosenthal4. Present after roll callRepresentative(s) Rosenthal.
5	The Speaker declared a quorum present.
17 18 19 20 21	On motion of Representative Carver, the reading of the journal of January 22, 2015, was declared dispensed with and approved as corrected by the Chief Clerk.
21 22 23 24 25 26 27 28	On motion of Representative Foote, the House resolved itself into Committee of the Whole for consideration of General Orders, and he was called to the Chair to act as Chairman.
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31	GENERAL ORDERSSECOND READING OF BILLS
32 33 34 35 36 37	The Committee of the Whole having risen, the Chairman reported the titles of the following bills had been read (reading at length had been dispensed with by unanimous consent), the bills considered and action taken thereon as follows:
38 39	(Amendments to the committee amendment are to the printed committee report which was printed and placed in the members' bill file.)
10 11 12 13	by Representative(s) Kraft-Tharp and Nordberg; also Senator(s) JahnConcerning a presumption that a trustee has notified a beneficiary when the trustee has adopted a

2 3		therewith, clarifying that a trustee may deliver information to beneficiaries electronically.					
4 5 6	Ordered engrossed and placed on the Calendar for Third Reading and Final Passage.						
7 8 9	<u>HB15-1028</u>	by Representative(s) Keyser; also Senator(s) Jah Concerning repeal of the mercantile licensing standard					
10 11 12	Ordered engrossed and placed on the Calendar for Third Reading and Final Passage.						
13 14 15 16 17	<u>HB15-1055</u>	by Representative(s) Esgar; also Senator(s) Grantham-Concerning the participation of people who are not state employees in the state employee assistance program established by the state personnel director.					
18 19 20 21	Amendment No. 1, Business Affairs and Labor Report, dated January 20, 2015, and placed in member's bill file; Report also printed in House Journal, January 21, 2015.						
22 23 24 25	As amended, ordered engrossed and placed on the Calendar for Third Reading and Final Passage.						
26 27 28 29	<u>HB15-1071</u>	by Representative(s) Keyser; also Senator(s) Hill-Concerning clarification that, following a merger of entities, the surviving entity is entitled to control the premerger attorney-client privileges of a constituent entity.					
30 31 32	Ordered engrossed and placed on the Calendar for Third Reading and Final Passage.						
33 34 35 36	<u>HB15-1039</u>	by Representative(s) Tyler; also Senator(s) Neville TConcerning the donation of prescription medications by licensed health care facilities.					
37 38 39 40 41	Amendment No. 1, Public Health Care & Human Services Report, dated January 20, 2015, and placed in member's bill file; Report also printed in House Journal, January 21, 2015.						
42 43 44 45		ordered engrossed and placed on the Calendar for Third Final Passage.					
46 47 48	ADOPTIO	ON OF COMMITTEE OF THE WHOLE REPORT					
49 50 51	Passed Secon amended.	d Reading: HB15-1010, 1028, 1055 amended, 1071, 1039					
51 52 53 54 55 56	Report. As s	an moved the adoption of the Committee of the Whole shown by the following roll call vote, a majority of those e House voted in the affirmative, and the Report was					

1	YES	62	NO	0	EXCUSED	3	ABSENT	0
2	Arndt	Y	Fields	Y	Lundeen	Y	Ryden	Y
3	Becker J.	E	Foote	Y	McCann	Y	Saine	Y
4	Becker K.	Y	Garnett	Y	Melton	Y	Salazar	Y
5	Brown	Y	Ginal	Y	Mitsch Bush	Y	Singer	Y
6	Buck	Y	Hamner	Y	Moreno	Y	Szabo	Y
7	Buckner	Y	Humphrey	Y	Navarro	Y	Tate	Y
8	Carver	Y	Joshi	Y	Neville P.	Y	Thurlow	Y
9	Conti	E	Kagan	Y	Nordberg	Y	Tyler	Y
10	Coram	Y	Keyser	Y	Pabon	Y	Van Winkle	Y
11	Court	Y	Klingenschmitt	Y	Pettersen	Y	Vigil	Y
12	Danielson	Y	Kraft-Tharp	Y	Primavera	Y	Willett	Y
13	DelGrosso	Y	Landgraf	Y	Priola	E	Williams	Y
14	Dore	Y	Lawrence	Y	Rankin	Y	Wilson	Y
15	Duran	Y	Lebsock	Y	Ransom	Y	Windholz	Y
16	Esgar	Y	Lee	Y	Rosenthal	Y	Winter	Y
17	Everett	Y	Lontine	Y	Roupe	Y	Young	Y
18					-		Speaker	Y

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MESSAGE FROM THE SENATE

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Madam Speaker:

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The Senate has adopted and transmits herewith: SJR15-005.

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INTRODUCTION AND CONSIDERATION OF RESOLUTION

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On motion of Representative Duran, the rules were suspended and the following resolution was given immediate consideration.

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by Senator(s) Sonnenberg; also Representative(s) Ryden--**SJR15-005** Concerning the designation of January 23, 2015, Colorado 4-H Day.

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40 (Printed and placed in members' files).

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On motion of Representative Ryden, the resolution was read at length and adopted by viva voce vote.

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Current Roll Call added as co-sponsor(s): Representative(s) Arndt, Becker K., 46 Brown, Buck, Buckner, Carver, Coram, Court, Danielson, DelGrosso, Dore, Duran, Esgar, Everett, Fields, Foote, Garnett, Ginal, Hamner,
 Humphrey, Joshi, Kagan, Keyser, Klingenschmitt, Kraft-Tharp, 49 Landgraf, Lawrence, Lebsock, Lee, Lontine, Lundeen, McCann, Melton, 50 Mitsch Bush, Moreno, Navarro, Neville P., Nordberg, Pabon, Pettersen, 51 Primavera, Rankin, Ransom, Rosenthal, Roupe, Saine, Salazar, Singer, Szabo, Tate, Thurlow, Tyler, Van Winkle, Vigil, Willett, Williams, Wilson, Windholz, Winter, Young.

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REPORT(S) OF COMMITTEE(S) OF REFERENCE

HEALTH, INSURANCE & ENVIRONMENT

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

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<u>HB15-1029</u> be amended as follows, and as so amended, be referred to the Committee of the Whole with favorable recommendation:

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Amend printed bill, page 2, line 4, strike "**Telemedicine**" and substitute "**Telehealth**".

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14 Page 2, line 5, strike "telemedicine" and substitute "telemedicine 15 TELEHEALTH".

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17 Page 2, line 6, strike "medical" and substitute "medical HEALTH CARE".

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Page 2, line 7, strike "person-to-person" and substitute "person-to-person IN-PERSON".

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22 Page 2, line 8, strike "2016," and substitute "2017,".

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24 Page 2, line 11, strike "face-to-face" and substitute "face-to-face 25 IN-PERSON".

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27 Page 2, line 12, strike "telemedicine, pursuant to".

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Page 2, line 13, strike "section 12-36-106 (1) (g), C.R.S.," and substitute "telemedicine, pursuant to section 12-36-106 (1) (g), C.R.S., TELEHEALTH,".

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33 Page 2, line 15, strike "Health benefits CARE SERVICES".

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Page 2, strike line 16 and substitute "health benefits provided through telemedicine shall meet the same standard of care as for in-person care.".

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Page 3, line 1, strike "as IS REQUIRED for in-person care.".

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40 Page 3, line 2, strike "telemedicine" and substitute "telemedicine" 41 TELEHEALTH".

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Page 3, line 5, strike "TELEMEDICINE" and substitute "TELEHEALTH".

Page 3, line 8, strike "TELEMEDICINE." and substitute "TELEHEALTH.".

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Page 3, line 9, strike "A" and substitute "SUBJECT TO ALL TERMS AND CONDITIONS OF THE HEALTH BENEFIT PLAN, A" and after "TREATING" insert "PARTICIPATING".

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50 Page 3, line 10, after "CONSULTING" insert "PARTICIPATING".

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52 Page 3, line 12, strike "TELEMEDICINE SERVICES" and substitute 53 "TELEHEALTH".

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Page 3, line 13, strike "COVERAGE" and substitute "REIMBURSING THAT PROVIDER".

PROVIDER.". Page 3, line 15, before "BECAUSE" insert "THAT IS A COVERED BENEFIT". 6 Page 3, line 16, strike "TELEMEDICINE" and substitute "TELEHEALTH". 8 Page 3, line 17, strike "PROVIDER" and substitute "PARTICIPATING PROVIDER OR, SUBJECT TO SECTION 10-16-704, THE NONPARTICIPATING 10 PROVIDER". 11 12 Page 3, line 19, strike "TELEMEDICINE." and substitute "TELEHEALTH. 13 SECTION 10-16-704 APPLIES TO THIS PARAGRAPH (b).". 14 15 Page 3, line 21, strike "TELEMEDICINE" and substitute "TELEHEALTH". 16 17 Page 3, line 23, strike "SERVICES." and substitute "SERVICES THROUGH 18 TELEHEALTH; EXCEPT THAT, FOR PURPOSES OF THIS PARAGRAPH (c), THE 19 ORIGINATING SITE DOES NOT INCLUDE A PRIVATE RESIDENCE AT WHICH 20 THE COVERED PERSON IS LOCATED WHEN HE OR SHE RECEIVES HEALTH 21 CARE SERVICES THROUGH TELEHEALTH.". 23 Page 3, line 26, strike "TELEMEDICINE," and substitute "TELEHEALTH,". 24 25 Page 4, strike lines 4 through 15 and substitute: 26 27 "(e) A CARRIER SHALL NOT IMPOSE AN ANNUAL DOLLAR MAXIMUM 28 ON COVERAGE FOR HEALTH CARE SERVICES COVERED UNDER THE HEALTH 29 BENEFIT PLAN THAT ARE DELIVERED THROUGH TELEHEALTH, OTHER THAN 30 AN ANNUAL DOLLAR MAXIMUM THAT APPLIES TO THE SAME SERVICES 31 WHEN PERFORMED BY THE SAME PROVIDER THROUGH IN-PERSON CARE. 32 (f) If a covered person receives health care services 33 THROUGH TELEHEALTH, A CARRIER SHALL APPLY THE SAME COPAYMENT, 34 COINSURANCE, OR DEDUCTIBLE AMOUNT AND POLICY-YEAR, 35 CALENDAR-YEAR, LIFETIME, OR OTHER DURATIONAL BENEFIT LIMITATION 36 OR MAXIMUM BENEFITS OR SERVICES UNDER THE HEALTH BENEFIT PLAN TO 37 THE HEALTH CARE SERVICES DELIVERED VIA TELEHEALTH THAT THE 38 CARRIER APPLIES UNDER THE HEALTH BENEFIT PLAN TO THOSE HEALTH 39 CARE SERVICES WHEN PERFORMED BY THE SAME PROVIDER THROUGH 40 IN-PERSON CARE.". 41 42 Reletter succeeding paragraph accordingly. 43 44 Page 4, line 18, strike "2016," and substitute "2017,". 45 46 Page 4, after line 27 insert: 47 48 "(h) NOTHING IN THIS SECTION PROHIBITS A CARRIER FROM 49 PROVIDING COVERAGE OR REIMBURSEMENT FOR HEALTH CARE SERVICES APPROPRIATELY PROVIDED THROUGH TELEHEALTH TO A COVERED PERSON WHO IS NOT LOCATED AT AN ORIGINATING SITE.".

Page 3, line 14, strike "CONTACT." and substitute "CONTACT BY THAT

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55 Page 5, line 4, strike "TELEMEDICINE." and substitute "TELEHEALTH.".
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53 Page 5, line 2, strike "HEALTH CARE".

Page 5, line 7, strike "TELEMEDICINE." and substitute "TELEHEALTH.".

Page 5, line 8, strike "TRANSMISSION" and substitute "ELECTRONIC TRANSFER".

Page 5, line 9, strike "FROM" and substitute "OR AN INTERACTION BETWEEN PROVIDERS THAT OCCURS BETWEEN" and strike "TO THE".

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Page 5, line 10, strike "PROVIDER AT THE DISTANT SITE" and substitute "AND DISTANT SITES".

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Page 5, strike lines 11 through 19 and substitute:

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- "SYNCHRONOUS INTERACTION" MEANS A REAL-TIME "(d) INTERACTION BETWEEN A PATIENT LOCATED AT THE ORIGINATING SITE AND A PROVIDER LOCATED AT A DISTANT SITE.
- (e) (I) "TELEHEALTH" MEANS A MODE OF DELIVERY OF HEALTH 18 CARE SERVICES THROUGH TELECOMMUNICATIONS SYSTEMS, INCLUDING 19 INFORMATION, ELECTRONIC, AND COMMUNICATION TECHNOLOGIES, TO 20 FACILITATE THE ASSESSMENT, DIAGNOSIS, CONSULTATION, TREATMENT, 21 EDUCATION, CARE MANAGEMENT, OR SELF-MANAGEMENT OF A COVERED 22 PERSON'S HEALTH CARE WHILE THE COVERED PERSON IS LOCATED AT AN ORIGINATING SITE AND THE PROVIDER IS LOCATED AT A DISTANT SITE. THE TERM INCLUDES SYNCHRONOUS INTERACTIONS AND STORE-AND-FORWARD 25 TRANSFERS.
- (II) "TELEHEALTH" DOES NOT INCLUDE THE DELIVERY OF HEALTH CARE SERVICES VIA TELEPHONE, FACSIMILE MACHINE, OR ELECTRONIC 28 MAIL SYSTEMS.

SECTION 2. In Colorado Revised Statutes, 10-16-102, amend 30 (33) as follows:

10-16-102. Definitions - repeal. As used in this article, unless the context otherwise requires:

(33) "Health care services" means any services included in or 34 incidental to the furnishing of medical, mental, dental, or optometric care; hospitalization; or nursing home care to an individual, as well as the furnishing to any person of any other services for the purpose of preventing, alleviating, curing, or healing human physical or mental illness or injury. "Health care services" includes the rendering of the services through the use of telemedicine TELEHEALTH, AS DEFINED IN SECTION 10-16-123 (4) (e).

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

10-16-704. Network adequacy - rules - legislative declaration. (1) A carrier providing a managed care plan shall maintain a network that is sufficient in numbers and types of providers to assure that all covered benefits to covered persons will be accessible without unreasonable delay. In the case of emergency services, covered persons shall have access to 48 health care services twenty-four hours per day, seven days per week. Sufficiency shall be determined in accordance with the requirements of this section and may be established by reference to any reasonable criteria used by the carrier, including but not limited to:

- (a) Provider-covered person ratios by specialty, which may include the use of providers through telemedicine TELEHEALTH for services that may appropriately be provided through telemedicine TELEHEALTH;
 - (9) Beginning January 1, 1998, a carrier shall maintain and make

available upon request of the commissioner, the executive director of the department of public health and environment, or the executive director of the department of health care policy and financing, in a manner and form that reflects the requirements specified in paragraphs (a) to (k) of this subsection (9), an access plan for each managed care network that the carrier offers in this state. The carrier shall make the access plans, absent confidential information as specified in section 24-72-204 (3), C.R.S., available on its business premises and shall provide them to any interested party upon request. In addition, all health benefit plans and marketing 10 materials shall clearly disclose the existence and availability of the access plan. All rights and responsibilities of the covered person under the health benefit plan, however, shall be included in the contract provisions, 12 regardless of whether or not such provisions are also specified in the 13 14 access plan. The carrier shall prepare an access plan prior to offering a 15 new managed care network and shall update an existing access plan 16 whenever the carrier makes any material change to an existing managed care network, but not less than annually. The access plan of a carrier 17 offering a managed care plan shall demonstrate the following: 18 19

An adequate number of accessible specialists and sub-specialists within a reasonable distance or travel time, or both, or who may be available through the use of telemedicine TELEHEALTH;

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

Renumber succeeding section accordingly.

Page 5, line 21, strike "2016;" and substitute "2017;".

Page 1, line 102, strike "TELEMEDICINE" and substitute "TELEHEALTH".

HB15-1067 be referred favorably to the Committee on Appropriations.

41 **LOCAL GOVERNMENT** 42

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

> HB15-1017 be referred to the Committee of the Whole with favorable recommendation.

> > PRINTING REPORT

The Chief Clerk reports the following bill has been correctly printed: HB15-1132.

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	On motion of Representative 10:00 a.m., January 26, 2015.	Duran,	the	House	adjourned	until
3	10.00 a.m., January 20, 2013.					
4		Appro				
5				EE HUI	LLIINGHO	RST,
6		Speake	er			
7	Attest:	•				
8	MARILYN EDDINS,					
	Chief Clerk					
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