

HOUSE COMMITTEE OF REFERENCE REPORT

Chairman of Committee

April 26, 2007
Date

Committee on Health and Human Services.

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

SB07-004 be amended as follows, and as so amended, be referred to the Committee on Appropriations with favorable recommendation:

- 1 Amend reengrossed bill, page 6, line 5, strike "PUBLIC MEDICAL
- 2 ASSISTANCE AND";

- 3 line 6, strike "INSURANCE." and substitute "INSURANCE AND AS USED BY
- 4 PUBLIC MEDICAL ASSISTANCE, TO THE EXTENT ALLOWED PURSUANT TO
- 5 SECTION 25.5-1-123, C.R.S."

- 6 Page 11, line 4, strike "RATES";

- 7 line 6, strike "PROVIDERS;" and substitute "PROVIDERS, TO THE EXTENT
- 8 PERMISSIBLE UNDER FEDERAL LAW;"

- 9 line 7, strike "AT THE NEGOTIATED RATE".

- 10 Page 13, after line 23, insert the following:

- 11 "(c) WITHIN SIXTY DAYS AFTER THE DEPARTMENT DETERMINES
- 12 THAT A CHILD IS NO LONGER AN ELIGIBLE CHILD FOR PURPOSES OF SECTION
- 13 10-16-104 (1.3), C.R.S., THE DEPARTMENT SHALL NOTIFY THE CARRIER
- 14 THAT THE CHILD IS NO LONGER ELIGIBLE AND THAT THE CARRIER IS NO
- 15 LONGER REQUIRED TO PROVIDE THE COVERAGE REQUIRED BY SAID
- 16 SECTION FOR THAT CHILD. ANY MONEYS DEPOSITED IN THE TRUST FUND
- 17 ON BEHALF OF AN ELIGIBLE CHILD THAT ARE NOT EXPENDED ON BEHALF OF
- 18 THE CHILD BEFORE THE CHILD BECOMES INELIGIBLE SHALL BE RETURNED

1 TO THE CARRIER THAT MADE THE PAYMENTS IN TRUST FOR THE CHILD.

2 (3) NO LATER THAN MARCH 1, 2009, AND NO LATER THAN MARCH
3 1 OF EACH YEAR THEREAFTER, THE DEPARTMENT SHALL PROVIDE A
4 REPORT TO EACH PRIVATE HEALTH INSURANCE CARRIER THAT HAS MADE
5 PAYMENTS OF BENEFITS FOR AN ELIGIBLE CHILD TO THE DEPARTMENT IN
6 TRUST. THE REPORT SHALL SPECIFY THE TOTAL AMOUNT OF BENEFITS PAID
7 TO BROKERS OR QUALIFIED PROVIDERS FOR SERVICES PROVIDED TO THE
8 ELIGIBLE CHILD DURING THE PRIOR CALENDAR YEAR, INCLUDING THE
9 AMOUNT PAID TO EACH BROKER OR QUALIFIED PROVIDER AND THE
10 SERVICES PROVIDED TO THE ELIGIBLE CHILD. THE REPORT REQUIRED BY
11 THIS SUBSECTION (3) SHALL BE PROVIDED AT LEAST ANNUALLY AND MORE
12 OFTEN, AS DETERMINED BY THE DEPARTMENT AND THE CARRIER."

13 Page 16, line 12, after "(5)", insert "(a)";

14 strike line 16 and substitute the following:

15 "THAT ARE DETERMINED, THROUGH NEGOTIATION BETWEEN THE STATE
16 DEPARTMENT AND THE DEPARTMENT OF HUMAN SERVICES, TO BE
17 MEDICALLY NECESSARY UNDER MEDICAL ASSISTANCE AND
18 COST-EFFECTIVE. AFTER NEGOTIATING THE SCOPE OF EARLY
19 INTERVENTION SERVICES TO BE COVERED UNDER MEDICAL ASSISTANCE,
20 THE STATE DEPARTMENT AND THE DEPARTMENT OF HUMAN SERVICES
21 SHALL SUBMIT TO THE JOINT BUDGET COMMITTEE OF THE GENERAL
22 ASSEMBLY, AS PART OF EACH DEPARTMENT'S ANNUAL BUDGET REQUEST,
23 A PROPOSAL FOR THE SCOPE OF COVERAGE OF EARLY INTERVENTION
24 SERVICES UNDER MEDICAL ASSISTANCE, INCLUDING THE ANTICIPATED
25 COSTS OF SUCH COVERAGE AND WHETHER THE PAYMENT OF SUCH COSTS
26 THROUGH MEDICAL ASSISTANCE IS COST-EFFECTIVE.

27 (b) "EARLY INTERVENTION SERVICES" SHALL NOT INCLUDE THE
28 FOLLOWING:";

29 line 17, strike "(a)" and substitute "(I)";

30 line 18, strike "(b)" and substitute "(II)";

31 line 19, strike "(c)" and substitute "(III)";

32 strike lines 21 and 22 and substitute the following:



1 "(IV) (A) ASSISTIVE TECHNOLOGY.

2 (B) THE EXCLUSION OF ASSISTIVE TECHNOLOGY SHALL NOT APPLY
3 TO DURABLE MEDICAL EQUIPMENT THAT IS OTHERWISE COVERED UNDER
4 THE CHILDREN'S BASIC HEALTH PLAN, AS DEFINED IN SECTION 25.5-8-103
5 (2).".

6 Page 17, line 15, strike "ENROLLED" and substitute "ELIGIBLE".

7 Page 19, line 3, strike "PRECEDING" and substitute "STATE FISCAL YEAR
8 THAT ENDS IN THE PRECEDING CALENDAR";

9 line 21, after "IFSP.", add "HOWEVER, SUCH SERVICES SHALL BE COVERED
10 AT THE LEVEL SPECIFIED IN PARAGRAPH (b) OF SUBSECTION (1.7) OF THIS
11 SECTION.";

12 line 24, strike "OR" and substitute "HEALTH INSURANCE, AS DEFINED BY
13 THE COMMISSIONER BY RULE,".

14 Page 20, after line 18, insert the following:

15 "(e) WITHIN SIXTY DAYS AFTER THE DIVISION DETERMINES THAT
16 A CHILD IS NO LONGER AN ELIGIBLE CHILD FOR PURPOSES OF THIS
17 SUBSECTION (1.3), THE DIVISION SHALL NOTIFY THE CARRIER THAT THE
18 CHILD IS NO LONGER ELIGIBLE AND THAT THE CARRIER IS NO LONGER
19 REQUIRED TO PROVIDE THE COVERAGE REQUIRED BY THIS SUBSECTION
20 (1.3) FOR THAT CHILD.".

21 Page 27, line 1, strike "Section 3" and substitute "Sections 3 and 4".

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