Second Regular Session Sixty-seventh General Assembly STATE OF COLORADO

PREAMENDED

This Unofficial Version Includes Committee Amendments Not Yet Adopted on Second Reading

LLS NO. 10-0161.01 Christy Chase

HOUSE BILL 10-1004

HOUSE SPONSORSHIP

Massey, Apuan, Frangas, Kerr J.

SENATE SPONSORSHIP

Foster, Boyd, Schwartz

House Committees
Health and Human Services

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Senate Committees

A BILL FOR AN ACT

CONCERNING STANDARDIZATION OF HEALTH INSURANCE INFORMATION PROVIDED TO CONSUMERS.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at http://www.leg.state.co.us/billsummaries.)

Health Care Task Force. The bill requires the commissioner of insurance (commissioner) to adopt rules establishing standard formats for policy forms and explanation of benefit forms provided by health insurance carriers to consumers. The bill obligates the commissioner to seek input from the health insurance industry, consumers, and other

stakeholders prior to adopting the rules. The bill requires carriers to comply with the standard format requirements starting July 1, 2011.

1 Be it enacted by the General Assembly of the State of Colorado: 2 **SECTION 1.** Part 1 of article 16 of title 10, Colorado Revised 3 Statutes, is amended BY THE ADDITION OF A NEW SECTION to 4 read: 5 10-16-137. Policy forms - explanation of benefits -6 standardization of forms - rules. (1) THE COMMISSIONER SHALL ADOPT 7 RULES TO STANDARDIZE THE POLICY FORMS FOR HEALTH BENEFIT PLANS, 8 LIMITED BENEFIT HEALTH INSURANCE, OR DENTAL PLANS. THE POLICY 9 FORMS SHALL BE STANDARDIZED ACCORDING TO SECTION NAMES AND THE 10 PLACEMENT OF THOSE SECTIONS IN THE POLICY FORMS ISSUED BY ALL 11 CARRIERS. PRIOR TO ADOPTING THE RULES, THE COMMISSIONER SHALL 12 SEEK INPUT FROM CARRIERS, CONSUMERS, HEALTH CARE PROVIDERS, AND 13 OTHER STAKEHOLDERS IN DEVELOPING THE STANDARDIZED FORMAT FOR 14 POLICY FORMS. THE RULES SHALL APPLY TO HEALTH BENEFIT PLANS, 15 LIMITED BENEFIT HEALTH INSURANCE, AND DENTAL PLANS ISSUED OR 16 DELIVERED ON OR AFTER JULY 1, 2011. 17 (2) THE COMMISSIONER SHALL ADOPT RULES ESTABLISHING A 18 STANDARD FORMAT FOR CARRIERS TO USE FOR AN EXPLANATION OF 19 BENEFITS FORM SENT TO COVERED PERSONS MAKING A CLAIM FOR 20 COVERED BENEFITS UNDER A HEALTH BENEFIT PLAN, LIMITED BENEFIT 21 HEALTH INSURANCE, OR A DENTAL PLAN. PRIOR TO ADOPTING THE RULES, 22 THE COMMISSIONER SHALL SEEK INPUT FROM CARRIERS, CONSUMERS, 23 HEALTH CARE PROVIDERS, AND OTHER STAKEHOLDERS IN DEVELOPING THE 24 STANDARDIZED FORMAT FOR EXPLANATION OF BENEFIT FORMS. THE 25 RULES SHALL APPLY TO EXPLANATION OF BENEFIT FORMS PERTAINING TO

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1	CLAIMS FOR BENEFITS UNDER HEALTH BENEFIT PLANS, LIMITED BENEFIT
2	HEALTH INSURANCE, AND DENTAL PLANS, SUBMITTED ON OR AFTER JULY
3	1, 2011.
4	SECTION 2. Act subject to petition - effective date. This act
5	shall take effect at 12:01 a.m. on the day following the expiration of the
6	ninety-day period after final adjournment of the general assembly (August
7	11, 2010, if adjournment sine die is on May 12, 2010); except that, if a
8	referendum petition is filed pursuant to section 1 (3) of article V of the
9	state constitution against this act or an item, section, or part of this act
10	within such period, then the act, item, section, or part shall not take effect
11	unless approved by the people at the general election to be held in
12	November 2010 and shall take effect on the date of the official
13	declaration of the vote thereon by the governor.

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