Second Regular Session Sixty-seventh General Assembly STATE OF COLORADO

REVISED

This Version Includes All Amendments Adopted on Second Reading in the Second House

LLS NO. 10-0159.01 Kristen Forrestal

HOUSE BILL 10-1005

HOUSE SPONSORSHIP

Massey, Frangas, Kerr J., McCann

SENATE SPONSORSHIP

Foster, Boyd, Lundberg, Schwartz

House CommitteesHealth and Human Serv

Health and Human Services Appropriations

Senate Committees

Health and Human Services Appropriations

A BILL FOR AN ACT

101	CONCERNING	HOME	HEALTH	CARE	THROUGH	TELEMEDICINE
102	PURSUANT TO THE "COLORADO MEDICAL ASSISTANCE ACT"					
103	AND MA	KING AN	APPROPRI	ATION T	THEREFOR	

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. This bill makes telemedicine eligible for reimbursement under the state's medical assistance program (program) in order to comply with direction from the federal centers for medicare and medicaid services.

SENATE Am ended 2nd Reading April 30, 2010

HOUSE 3rd Reading Unam ended April 14, 2010

HOUSE ended 2nd Reading April13,2010

Shading denotes HOUSE amendment. <u>Double underlining denotes SENATE amendment.</u>

Capital letters indicate new material to be added to existing statute.

Dashes through the words indicate deletions from existing statute.

Eliminates incorrect references to the way reimbursement payments are made under the program.

Deletes the requirement that reimbursement rates from telemedicine be budget neutral or result in cost savings to the program. Requires that any cost savings identified be considered for use in paying for home health care or home- and community-based services instead of requiring the savings be applied to payment for the services.

Deletes the requirement that the state medical services board consider reductions in travel costs by home health care or home- and community-based service providers and other factors when setting reimbursement rates for services.

Be it enacted by the General Assembly of the State of Colorado:

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SECTION 1. 25.5-5-321 (1), (2), and (3), Colorado Revised Statutes, are amended to read:

25.5-5-321. Telemedicine - home health care - home health telemedicine cash fund - rules. (1) On or after January 1, 2008, in-person contact between a home health care or a home- and community-based services provider and a patient shall not be required under the state's medical assistance program for home health care services or home- and community-based services delivered through telemedicine that are otherwise eligible for reimbursement under the program. This program shall include health care professional oversight and intervention as appropriate THE EFFECTIVE DATE OF THIS SUBSECTION (1), AS AMENDED, AT-HOME TELEMEDICINE SHALL BE ELIGIBLE FOR REIMBURSEMENT UNDER THE STATE'S MEDICAL ASSISTANCE PROGRAM. The services delivered through telemedicine shall be subject to reimbursement policies promulgated by rule of the state board after consultation with home health care and home- and community-based services providers. This section also applies to managed care organizations that contract with the state department pursuant to the

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statewide managed care system, but only to the extent that:

- (a) Home health care or home- and community-based services delivered through telemedicine are covered by and reimbursed under the medicaid per diem payment program; and
- (b) Managed care contracts with managed care organizations are amended to add coverage of home health care or home- and community-based services delivered through telemedicine. and any appropriate per diem rate adjustments are incorporated.
- (2) (a) The reimbursement rate for home health care or home- and community-based services delivered through telemedicine that are otherwise eligible for reimbursement under the medical assistance program shall be set by rule of the state board and shall be:
- (I) In the form of a flat fee per month in one or more levels, depending on acuity. and
 - (II) Budget-neutral or result in cost savings to the program.
- (b) Any cost savings identified pursuant to this section shall be made available CONSIDERED for use in paying for home- and community-based services under part 6 of this article, community-based long-term care, and home health services.
- (c) FOR THE FIRST TWO YEARS AFTER THE EFFECTIVE DATE OF THIS PARAGRAPH (c), GIFTS, GRANTS, AND DONATIONS SHALL BE USED TO IMPLEMENT THIS SECTION. GIFTS, GRANTS, AND DONATIONS MADE FOR THIS PURPOSE SHALL BE TRANSFERRED TO THE HOME HEALTH TELEMEDICINE CASH FUND, WHICH IS HEREBY CREATED IN THE STATE TREASURY. MONEYS IN THE HOME HEALTH TELEMEDICINE CASH FUND SHALL BE APPROPRIATED TO THE STATE BOARD AND USED TO IMPLEMENT THIS SECTION. MONEYS IN THE FUND SHALL REMAIN IN THE FUND AND

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2	YEAR. AFTER TWO YEARS OR IF THE MONEYS IN THE CASH FUND ARE				
3	DEPLETED, THE DEPARTMENT IS AUTHORIZED TO GO THROUGH THE				
4	NORMAL BUDGET PROCESS TO CONTINUE IMPLEMENTATION OF THIS				
5	SECTION.				
6	(3) When setting the reimbursement rate for services under				
7	subsection (2) of this section, the state board shall consider, to the extent				
8	applicable, reductions in travel costs by home health care or home- and				
9	community-based services providers to deliver the services and such				
10	other factors as the state department deems relevant. Reimbursement				
11	shall not be provided for purchase or lease of telemedicine equipment.				
12	SECTION 2. Appropriation. In addition to any other				
13	appropriation, there is hereby appropriated, to the department of health				
14	care policy and financing, for medical services premiums, for the fiscal				
15	year beginning July 1, 2010, the sum of one hundred twenty-three				
16	thousand two hundred seventy dollars (\$123,270), or so much thereof as				
17	may be necessary, for the implementation of this act. Of said sum,				
18	forty-seven thousand three hundred forty-eight dollars (\$47,348) shall be				
19	from the home health telemedicine cash fund created in section				
20	25.5-5-321 (1) (c), Colorado Revised Statutes, and seventy-five thousand				
21	nine hundred twenty-two dollars (\$75,922) shall be from federal funds.				
22	SECTION 3. Act subject to petition - effective date. This act				
23	shall take effect at 12:01 a.m. on the day following the expiration of the				
24	ninety-day period after final adjournment of the general assembly				
25	(August 11, 2010, if adjournment sine die is on May 12, 2010); except				
26	that, if a referendum petition is filed pursuant to section 1 (3) of article				
27	V of the state constitution against this act or an item, section, or part of				

NOT BE TRANSFERRED TO THE GENERAL FUND AT THE END OF ANY FISCAL

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- this act within such period, then the act, item, section, or part shall not
- 2 take effect unless approved by the people at the general election to be
- 3 held in November 2010 and shall take effect on the date of the official
- 4 declaration of the vote thereon by the governor.

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