## Second Regular Session Sixty-seventh General Assembly STATE OF COLORADO

## REVISED

This Version Includes All Amendments Adopted on Second Reading in the Second House HOUSE BILL 10-1004

LLS NO. 10-0161.01 Christy Chase

HOUSE SPONSORSHIP

Massey, Apuan, Frangas, Kerr J.

## SENATE SPONSORSHIP

Foster, Boyd, Schwartz

House Committees Health and Human Services Senate Committees Health and Human Services

## A BILL FOR AN ACT

101 CONCERNING STANDARDIZATION OF HEALTH INSURANCE
102 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

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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 7 CONVENE A GROUP OF STAKEHOLDERS, INCLUDING CARRIERS, PROVIDERS, 8 AND CONSUMERS, TO DEVELOP A STANDARDIZED FORMAT FOR THE 9 FOLLOWING REGARDING HEALTH BENEFIT PLANS, LIMITED BENEFIT HEALTH 10 INSURANCE, AND DENTAL PLANS: 11 (a) SECTION NAMES AND THE PLACEMENT OF THOSE SECTIONS IN 12 THE POLICY FORMS ISSUED BY ALL CARRIERS; AND 13 (b) THE REQUIRED INFORMATION FOR CARRIERS TO PROVIDE ON AN 14 EXPLANATION OF BENEFITS FORM SENT TO COVERED PERSONS OR 15 PROVIDERS MAKING A CLAIM FOR BENEFITS UNDER A HEALTH BENEFIT 16 PLAN, LIMITED BENEFIT HEALTH INSURANCE, OR DENTAL PLAN. 17 (2) THE COMMISSIONER SHALL ADOPT RULES AFTER CONSIDERING 18 THE INPUT FROM CARRIERS, PROVIDERS, CONSUMERS, AND OTHER 19 STAKEHOLDERS IN DEVELOPING THE STANDARDIZED FORMAT FOR POLICY 20 FORMS AND EXPLANATION OF BENEFIT FORMS. THE RULES SHALL APPLY 21 TO HEALTH BENEFIT PLANS, LIMITED BENEFIT HEALTH INSURANCE, AND 22 DENTAL PLANS ISSUED OR DELIVERED ON OR AFTER JANUARY 1, 2012. 23 24 SECTION 2. Act subject to petition - effective date. This act 25 shall take effect at 12:01 a.m. on the day following the expiration of the

ninety-day period after final adjournment of the general assembly (August 1 2 11, 2010, if adjournment sine die is on May 12, 2010); except that, if a 3 referendum petition is filed pursuant to section 1 (3) of article V of the 4 state constitution against this act or an item, section, or part of this act 5 within such period, then the act, item, section, or part shall not take effect 6 unless approved by the people at the general election to be held in November 2010 and shall take effect on the date of the official 7 8 declaration of the vote thereon by the governor.