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

## REENGROSSED

This Version Includes All Amendments Adopted in the House of Introduction

LLS NO. 10-0326.01 Christy Chase

**HOUSE BILL 10-1220** 

### **HOUSE SPONSORSHIP**

Priola, Liston, Rice, Stephens

## SENATE SPONSORSHIP

Schwartz,

#### **House Committees**

### **Senate Committees**

**Business Affairs and Labor** Finance Appropriations

## A BILL FOR AN ACT

101	CONCERNING THE SUNSET REVIEW OF THE FUNCTIONS OF THE DIVISION
102	OF INSURANCE RELATED TO THE REGULATION OF SPECIFIED
103	LINES OF INSURANCE, AND, IN CONNECTION THEREWITH,
104	CONTINUING THE FUNCTIONS OF THE DIVISION RELATED TO THE
105	REGULATION OF PROPERTY AND CASUALTY, AUTOMOBILE, AND
106	OTHER INSURERS THAT DO NOT OFFER HEALTH, LIFE, PROPERTY,
107	CASUALTY, OR AUTOMOBILE INSURANCE THROUGH JULY 1,
108	2017; CONSOLIDATING THE SUNSET REVIEW OF ALL FUNCTIONS
109	OF THE DIVISION OF INSURANCE OTHER THAN THOSE RELATED
110	TO THE LICENSING OF BAIL BONDING AGENTS; AND
111	IMPLEMENTING OTHER RECOMMENDATIONS CONTAINED IN THE
112	SUNSET REPORT.

3rd Reading Unam ended

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## **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.)

Sunset Process - House Business Affairs and Labor Committee. The bill implements the recommendations of the department of regulatory agencies in its sunset review of the functions of the division of insurance (division) related to the regulation of property and casualty, automobile, and any other entity or function that does not offer health or life insurance, as follows:

**Sections 1, 2, and 3** of the bill continue the functions of the division related to the regulation of property and casualty, automobile, and any other entity or function that does not offer health or life insurance for 7 years, until July 1, 2017.

**Sections 1, 2, and 3** of the bill repeal the current sunset review schedule related to the other functions of the division and consolidate the sunset review of the entire division, except for its functions related to the licensing of bail bonding agents, with a new sunset repeal date of July 1, 2017.

**Section 4** of the bill establishes the following acts, practices, or omissions as unfair or deceptive acts or practices in the business of insurance:

- ! Knowingly making any false entry of a material fact in any book, report, or statement of any insurer;
- ! Knowingly omitting or failing to make a true entry of a material fact pertaining to the business of the insurer in any book, report, or statement of the insurer; and
- ! Knowingly making any false material statement to the commissioner of insurance (commissioner) or any employee or agent of the division.

**Section 5** of the bill establishes the following practices as unfair discrimination in the business of insurance:

- Differential treatment of individuals of the same class and essentially the same hazard in the amount of premium, policy fees, or rates charged for health insurance, in the benefits payable under a health insurance policy, in the terms or conditions of the policy, or in any other manner; and
- ! Differential treatment of individuals of the same class or risks and essentially the same hazard by refusing to insure

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or renew, or canceling or limiting the amount of coverage under, a policy of property or casualty insurance solely based on the geographical location of the risk, absent sound underwriting and actuarial justification.

**Section 6** of the bill repeals an outdated statutory requirement mandating insurers to publish a synopsis of their annual financial reports in a newspaper of general circulation.

**Section 7** of the bill allows the commissioner to make available to the public the final results of insurer self-audits and other division analyses of insurers that do not constitute formal market conduct examinations of the insurer.

**Section 8** of the bill repeals the statutory authorization for the formation of employers' mutual liability companies and self-insurance pools for the purpose of providing coverages such as workers' compensation coverage.

**Section 9** of the bill allows, rather than mandates, the commissioner to rely on the advice and assistance of an association of insurance brokers to carry out the purposes of the "Nonadmitted Insurance Act".

Current law allows the commissioner to perform examinations of the books, records, and accounts of licensed preneed funeral contract sellers but limits the commissioner's ability to perform such examinations to not more than once a year, unless good cause is shown. **Section 10** of the bill requires, rather than permits, the commissioner to perform examinations of the books, records, and accounts of each licensed preneed funeral contract seller at least once every 5 years and allows the commissioner to conduct such examinations more often as deemed necessary by the commissioner.

**Section 11** of the bill repeals the medical malpractice insurance joint underwriting association.

Section 12 of the bill repeals the commercial liability insurance joint underwriting association.

**Section 13** of the bill reconciles the number of days allowed until a protested motor vehicle policy change is effective. Under current law, when the commissioner dismisses a protest to an insurer's proposed changes to a policy without first conducting a hearing, the proposed changes cannot take effect for 15 days after notice of the dismissal. Alternatively, current law establishes a 20-day delay for the effectiveness of a proposed change when the commissioner conducts a hearing and finds that the proposed change is justified. Section 13 reconciles these 2 different periods to ensure that a proposed change takes effect 20 days after notice, regardless of whether the protest was dismissed without a hearing or the proposed change was found, after a hearing, to be justified.

Sections 14 and 15 of the bill repeal obsolete provisions of law requiring Pinnacol Assurance (Pinnacol) to submit a plan to the

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commissioner regarding how it intends to accumulate a surplus fund since Pinnacol has submitted the plan and has accumulated a sufficient surplus.

Sections 16 through 22 of the bill contain conforming statutory changes necessitated by the repeal of other provisions of law in section 11 of the bill.

**Section 23** of the bill specifies that the bill takes effect on July 1, 2010, and **section 24** declares the act necessary for the immediate preservation of public peace, health, and safety.

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

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2 **SECTION 1.** 10-1-103 (6) (b) (I) (A), (6) (b) (I) (B.5), (6) (b) (I) 3 (C), (6) (b) (I) (D), and (6) (b) (I) (E), Colorado Revised Statutes, are 4 amended to read: 5 10-1-103. Division of insurance - subject to termination -6 **repeal of functions.** (6) (b) (I) (A) The functions of the division of 7 insurance related to the licensing of bail bonding agents are repealed, 8 effective July 1, <del>2013</del> 2012, pursuant to the provisions of this section and 9 section 12-7-112, C.R.S. 10 (B.5) The functions of the division of insurance related to the 11 regulation of life insurance are repealed, effective July 1, 2016, pursuant 12 to the provisions of this section and section 24-34-104 (47), C.R.S. 13 (C) The functions of the division of insurance related to the 14 licensing of insurance producers are repealed, effective July 1, 2019, 15 pursuant to the provisions of this section and section 24-34-104, C.R.S. 16 (D) The functions of the division of insurance, related to the 17 regulation of property and casualty, automobile, and any other entity or 18 function that does not offer health, life, property, casualty, or automobile 19 insurance by the division OTHER THAN THOSE FUNCTIONS RELATED TO THE 20 LICENSING OF BAIL BONDING AGENTS, are repealed, effective July 1, <del>2010</del> 21 2017, pursuant to the provisions of this section and section 24-34-104

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1	<del>(41)</del> (48), C.R.S.
2	(E) The functions of the division of insurance related to the
3	regulation of health care coverage are repealed, effective July 1, 2012,
4	pursuant to the provisions of this section and section 24-34-104 (43),
5	<del>C.R.S.</del>
6	SECTION 2. 12-7-112, Colorado Revised Statutes, is amended
7	to read:
8	12-7-112. Repeal - review of functions. This article is repealed,
9	effective July 1, <del>2013</del> 2012. Prior to such repeal, the licensing functions
10	of the commissioner and the division shall be reviewed as provided for in
11	section 24-34-104, C.R.S.
12	<b>SECTION 3.</b> 24-34-104 (43), Colorado Revised Statutes, is
13	amended BY THE ADDITION OF A NEW PARAGRAPH to read:
14	24-34-104. General assembly review of regulatory agencies
15	and functions for termination, continuation, or reestablishment.
16	(43) The following agencies, functions, or both, shall terminate on July
17	1, 2012:
18	(f) THE LICENSING OF BAIL BONDING AGENTS THROUGH THE
19	DIVISION OF INSURANCE IN ACCORDANCE WITH ARTICLE 7 OF TITLE 12,
20	C.R.S.
21	<b>SECTION 4.</b> 24-34-104 (48), Colorado Revised Statutes, is
22	amended BY THE ADDITION OF A NEW PARAGRAPH to read:
23	24-34-104. General assembly review of regulatory agencies
24	and functions for termination, continuation, or reestablishment.
25	(48) The following agencies, functions, or both, shall terminate on July
26	1, 2017:
27	(i) The functions of the division of insurance in the

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1	DEPARTMENT OF REGULATORY AGENCIES PURSUANT TO ARTICLE 1 OF
2	TITLE 10, C.R.S., OTHER THAN THE FUNCTIONS OF THE DIVISION RELATED
3	TO THE LICENSING OF BAIL BONDING AGENTS.
4	<b>SECTION 5. Repeal.</b> 24-34-104 (41) (n), (43) (b), (44) (m), (47)
5	(a), and (50) (a), Colorado Revised Statutes, are repealed as follows:
6	24-34-104. General assembly review of regulatory agencies
7	and functions for termination, continuation, or reestablishment.
8	(41) The following agencies, functions, or both, shall terminate on July
9	1, 2010:
10	(n) The functions of the division of insurance related to the
11	regulation of property and casualty, automobile, and any other entity or
12	function that does not offer health, life, property, casualty, or automobile
13	insurance by the division, pursuant to article 1 of title 10, C.R.S.;
14	(43) The following agencies, functions, or both, shall terminate on
15	July 1, 2012:
16	(b) The functions of the division of insurance related to the
17	regulation of health care coverage pursuant to the provisions of article 1
18	of title 10, C.R.S.;
19	(44) The following agencies, functions, or both, shall terminate on
20	July 1, 2013:
21	(m) The licensing of bail bonding agents through the division of
22	insurance in accordance with article 7 of title 12, C.R.S.;
23	(47) The following agencies, functions, or both, shall terminate on
24	July 1, 2016:
25	(a) The functions of the division of insurance related to the
26	regulation of life insurance pursuant to article 1 of title 10, C.R.S.;
2.7	(50) The following agencies, functions, or both, shall terminate on

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July 1, 2019:

2 (a) The functions of the division of insurance related to the licensing of insurance producers, pursuant to article 1 of title 10, C.R.S.;

**SECTION 6.** 10-3-1104 (1) (b), Colorado Revised Statutes, is amended to read:

- 10-3-1104. Unfair methods of competition and unfair or deceptive acts or practices. (1) The following are defined as unfair methods of competition and unfair or deceptive acts or practices in the business of insurance:
  - (b) False information and advertising generally:
- (I) Making, publishing, disseminating, circulating, or placing before the public, or causing, directly or indirectly, to be made, published, disseminated, circulated, or placed before the public, in a newspaper, magazine, or other publication, or in the form of a notice, circular, pamphlet, letter, or poster, or over any radio or television station, or in any other way, an advertisement, announcement, or statement containing any assertion, representation, or statement with respect to the business of insurance, or with respect to any person in the conduct of his OR HER insurance business, which is untrue, deceptive, or misleading;
- (II) Knowingly filing with the commissioner or other public official, or with any employee or agent of the division of insurance in the department of regulatory agencies, a written, false statement of material fact as to the financial condition of an insurer; knowingly making, publishing, disseminating, circulating, or delivering to any person or placing before the public any written, false statement of material fact as to the financial condition of an insurer; or knowingly causing,

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1	DIRECTLY OR INDIRECTLY, ANY WRITTEN, FALSE STATEMENT OF MATERIAL
2	FACT AS TO THE FINANCIAL CONDITION OF AN INSURER TO BE MADE,
3	PUBLISHED, DISSEMINATED, CIRCULATED, OR DELIVERED TO ANY PERSON
4	OR TO BE PLACED BEFORE THE PUBLIC;
5	(III) KNOWINGLY MAKING ANY FALSE ENTRY OF A MATERIAL FACT
6	IN ANY BOOK, REPORT, OR OTHER WRITTEN STATEMENT OF ANY INSURER;
7	KNOWINGLY OMITTING OR FAILING TO MAKE A TRUE ENTRY OF A
8	MATERIAL FACT PERTAINING TO THE BUSINESS OF THE INSURER IN ANY
9	BOOK, REPORT, OR OTHER WRITTEN STATEMENT OF THE INSURER; OR
10	KNOWINGLY MAKING ANY WRITTEN, FALSE MATERIAL STATEMENT TO THE
11	COMMISSIONER OR ANY EMPLOYEE OR AGENT OF THE DIVISION OF
12	INSURANCE IN THE DEPARTMENT OF REGULATORY AGENCIES;
13	<b>SECTION 7.</b> 10-3-1104 (1) (f), Colorado Revised Statutes, is
14	amended BY THE ADDITION OF THE FOLLOWING NEW
15	SUBPARAGRAPHS to read:
16	10-3-1104. Unfair methods of competition and unfair or
17	deceptive acts or practices. (1) The following are defined as unfair
18	methods of competition and unfair or deceptive acts or practices in the
19	business of insurance:
20	(f) (XIII) MAKING OR PERMITTING ANY UNFAIR DISCRIMINATION
21	BETWEEN INDIVIDUALS OF THE SAME CLASS AND OF ESSENTIALLY THE
22	SAME HAZARD IN THE AMOUNT OF PREMIUM, POLICY FEES, OR RATES
23	CHARGED FOR ANY POLICY OF SICKNESS AND ACCIDENT INSURANCE, IN THE
24	BENEFITS PAYABLE UNDER SUCH POLICY, IN THE TERMS OR CONDITIONS OF
25	THE POLICY, OR IN ANY OTHER MANNER;
26	(XIV) MAKING OR PERMITTING ANY UNFAIR DISCRIMINATION
27	BETWEEN INDIVIDUALS OR RISKS OF THE SAME CLASS AND OF ESSENTIALLY

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1	THE SAME HAZARD BY REFUSING TO INSURE, REFUSING TO RENEW,
2	CANCELING, OR LIMITING THE AMOUNT OF INSURANCE COVERAGE ON A
3	PROPERTY AND CASUALTY RISK SOLELY BECAUSE OF THE GEOGRAPHIC
4	LOCATION OF THE RISK, UNLESS THE ACTION IS THE RESULT OF THE
5	APPLICATION OF SOUND UNDERWRITING AND ACTUARIAL PRINCIPLES
6	RELATED TO ACTUAL OR REASONABLY ANTICIPATED LOSS EXPERIENCE;
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8	<b>SECTION 8.</b> 10-1-213, Colorado Revised Statutes, is amended
9	BY THE ADDITION OF A NEW SUBSECTION to read:
10	10-1-213. Confidentiality requirements.
11	(5) NOTWITHSTANDING THE CONFIDENTIALITY REQUIREMENTS IN
12	PARAGRAPH (c) OF SUBSECTION (1) OF THIS SECTION, WHEN THE
13	COMMISSIONER REQUESTS AN INSURER TO CONDUCT A SELF-AUDIT OR
14	ENGAGES IN AN ANALYSIS OF THE INSURER THAT DOES NOT RISE TO THE
15	LEVEL OF AN EXAMINATION, THE COMMISSIONER MAY MAKE THE FINAL
16	RESULTS OF THE SELF-AUDIT OR ANALYSIS AVAILABLE FOR PUBLIC
17	INSPECTION IN A MANNER DEEMED APPROPRIATE BY THE COMMISSIONER.
18	SECTION 9. Repeal. Part 2 of article 12 of title 10, Colorado
19	Revised Statutes, is repealed.
20	<b>SECTION 10.</b> The introductory portion to 10-5-115 (2), Colorado
21	Revised Statutes, is amended to read:
22	10-5-115. Authority of commissioner - assistance of brokers'
23	<b>association.</b> (2) The commissioner shall MAY rely upon the advice and
24	assistance of a duly constituted association of brokers in carrying out the
25	purposes of this article, if the association files with the commissioner:
26	SECTION 11. 10-15-103 (4), Colorado Revised Statutes, is
27	amended to read:

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**10-15-103.** License procedure - records - examination of records. (4) (a) The contract seller shall make all books and records available to the commissioner for examination. The commissioner, or a qualified person designated by the commissioner, may, not more frequently than once in any calendar year unless pursuant to order of court for good cause shown, during ordinary business hours, SHALL examine the books, records, and accounts of the contract seller AT LEAST ONCE EVERY FIVE YEARS, AND MORE OFTEN AS NECESSARY TO ENSURE COMPLIANCE WITH THIS ARTICLE, and for that purpose may require the attendance of and examine under oath all persons whose testimony the commissioner may require.

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(b) The commissioner shall make every reasonable effort to utilize examiners employed by the division of insurance in preference to designating persons to perform examinations who are not employees of the division of insurance. However, in the event of evidence of a violation of this article, the commissioner may designate a qualified person who is not an employee of the division of insurance to examine any contract seller, and the reasonable expenses and charges of such examiner shall be paid directly by the contract seller to any such authorized examiner. The examinee may contest the amount of fees, costs, and expenses charged to it by such person by filing an objection with the commissioner which THAT sets forth the charges which the examinee considers to be unreasonable, together with the basis for such claim of unreasonable charges. No amounts which THAT are so disputed will be due to the examiner unless and until the commissioner has reviewed the objection and made a written finding that the disputed charges were reasonable in relation to the examination performed.

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1	<b>SECTION 12. Repeal.</b> Part 9 of article 4 of title 10, Colorado
2	Revised Statutes, is repealed.
3	SECTION 13. Repeal. Part 11 of article 4 of title 10, Colorado
4	Revised Statutes, is repealed.
5	SECTION 14. 10-4-629 (6), Colorado Revised Statutes, is
6	amended to read:
7	10-4-629. Cancellation - renewal - reclassification. (6) If the
8	commissioner finds from the notice and other evidence that the protest is
9	with or without merit, the commissioner may grant or dismiss the protest
10	without a hearing and shall, in that event, promptly notify the insurer and
11	the insured in writing of such action. If the protest is dismissed without
12	a hearing, the proposed action of the insurer shall become effective on its
13	proposed effective date or fifteen TWENTY days after written notice of the
14	action is given by the commissioner to the insured, whichever is later. If
15	the notice of the proposed action does not comply with Colorado law, the
16	commissioner shall disallow the action. In all other cases, the
17	commissioner shall hold a hearing on the protest within forty-five days
18	after receipt of the protest and shall give written notice of the time and
19	place thereof to the insurer and the insured at least ten days prior to the
20	scheduled date of the hearing. The insurer shall have the burden of
21	proving its proposed action to be justified and, in doing so, may rely only
22	upon the reasons set forth in its notice to the insured.
23	<b>SECTION 15.</b> 8-45-111, Colorado Revised Statutes, is amended
24	to read:
25	8-45-111. Portions of premiums paid carried to surplus. The
26	board shall set aside such proportion as it may deem necessary of the
2.7	earned premiums paid into the Pinnacol Assurance fund, as a contribution

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to the surplus of the fund. No later than January 1, 2001, the board shall
submit a plan for approval by the commissioner of insurance for the
attainment of a reasonable surplus as determined in accordance with
section 10-3-201, C.R.S., or such surplus as approved by the
commissioner of insurance. All business records related to such plan
shall be disclosed by Pinnacol Assurance to the same extent as similar
records are disclosed by the other insurance companies.
<b>SECTION 16.</b> 8-45-117 (5), Colorado Revised Statutes, is
amended to read:
8-45-117. Regulation by commissioner of insurance. (5) At
such time as a reasonable surplus of the Pinnacol Assurance fund is
reached pursuant to section 8-45-111, or when Pinnacol Assurance fails
to comply with the plan to attain a reasonable surplus as set forth in
section 8-45-111, Pinnacol Assurance shall be subject to regulation by the
commissioner of insurance as provided in section 10-1-205 (7) and part
4 of article 3 of title 10, C.R.S., to the extent consistent with the
provisions of this article.
SECTION 17. 10-4-401 (3) (b), Colorado Revised Statutes, is
amended to read:
10-4-401. Purpose - applicability. (3) The kinds of insurance
subject to this part 4 shall be divided into two classes, as follows:
(b) Type II kinds of insurance, regulated by open competition
between insurers, including fire, casualty, inland marine, title, medical
malpractice by a joint underwriting association regulated under part 9 of
this article, credit, workers' compensation and employer's liability
incidental thereto and written in connection therewith for rates filed by
insurers, and all other kinds of insurance that are subject to this part 4 and

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1	not specified in paragraph (a) of this subsection (3), including the expense
2	and profit components of workers' compensation insurance, which shall
3	be subject to all the provisions of this part 4 except for sections 10-4-405
4	and 10-4-406. Type II insurers shall file rating data, as provided in
5	section 10-4-403, with the commissioner; except that credit life and credit
6	accident and health insurers shall file schedules of premium rates
7	pursuant to sections 10-10-109 and 10-10-110. A rate filing summary for
8	a type II kind of insurance subject to this part 4, except for workers'
9	compensation insurance, shall be posted on the division's internet WEB
10	site in order to provide notice to the public. The public notice shall
11	include the rate standards that apply pursuant to section 10-4-403 (1).
12	Nothing in this section shall be construed to limit the right of the public
13	to inspect a rate filing and any supporting information pursuant to part 2
14	of article 72 of title 24, C.R.S., or to impair the commissioner's ability to
15	review rates and determine that the rates are not excessive, inadequate, or
16	unfairly discriminatory.
17	<b>SECTION 18.</b> 10-4-601, Colorado Revised Statutes, is amended
18	BY THE ADDITION OF A NEW SUBSECTION to read:
19	<b>10-4-601. Definitions.</b> As used in this part 6, unless the context
20	otherwise requires:
21	(5.5) "LICENSED HEALTH CARE PROVIDER" MEANS A PERSON,
22	CORPORATION, FACILITY, OR INSTITUTION LICENSED OR CERTIFIED BY THIS
23	STATE TO PROVIDE HEALTH CARE OR PROFESSIONAL SERVICES AS A
24	HOSPITAL, HEALTH CARE FACILITY, OR DISPENSARY OR TO PRACTICE AND
25	PRACTICING MEDICINE, OSTEOPATHY, CHIROPRACTIC, NURSING, PHYSICAL
26	THERAPY, PODIATRY, DENTISTRY, PHARMACY, ACUPUNCTURE, OR
27	OPTOMETRY IN THIS STATE, OR AN OFFICER, EMPLOYEE, OR AGENT OF THE

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1	PERSON, CORPORATION, FACILITY, OR INSTITUTION WORKING UNDER THE
2	${\tt SUPERVISIONOFTHEPERSON,CORPORATION,FACILITY,ORINSTITUTIONIN}$
3	PROVIDING HEALTH CARE SERVICES.
4	<b>SECTION 19.</b> 10-4-634 (1), Colorado Revised Statutes, is
5	amended to read:
6	10-4-634. Assignment of payment for covered benefits. (1) On
7	and after thirty days after April 5, 2004, a policy of motor vehicle
8	insurance coverage pursuant to this part 6 shall allow, but not require, an
9	insured under the policy to assign, in writing, payments due under
10	medical payments coverage of the policy to a licensed hospital or other
11	licensed health care provider, as defined in section 10-4-902 (3), an
12	occupational therapist as defined in section 12-40.5-103, C.R.S., or a
13	massage therapist as defined in section 12-35.5-103 (8), C.R.S., for
14	services provided to the insured that are covered under the policy.
15	<b>SECTION 20.</b> 10-4-635 (5) (d), Colorado Revised Statutes, is
16	amended to read:
17	10-4-635. Medical payments coverage - disclosure - definitions.
18	(5) As used in this section:
19	(d) "Licensed health care provider" shall have the same meaning
20	as set forth in section 10-4-902 10-4-601, and also includes an
21	occupational therapist as defined in section 12-40.5-103 (8), C.R.S.
22	<b>SECTION 21.</b> 10-4-637, Colorado Revised Statutes, is amended
23	to read:
24	10-4-637. No discrimination by profession. Reimbursement for
25	lawfully performed health care services covered by a policy providing
26	medical payments coverage under a motor vehicle policy issued pursuant

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1	and rendered within the scope of practice for a licensed health care
2	provider, as defined in section 10-4-902 (3), a massage therapist, as
3	defined in section 12-35.5-103, C.R.S., or an occupational therapist, as
4	defined in section 12-40.5-103, C.R.S., performing the services.
5	SECTION 22. 10-16-102 (26.3), Colorado Revised Statutes, is
6	amended to read:
7	10-16-102. Definitions. As used in this article, unless the context
8	otherwise requires:
9	(26.3) "Licensed health care provider" shall have the same
10	meaning as in section <del>10-4-902 (3)</del> 10-4-601.
11	<b>SECTION 23.</b> 10-16-106.7 (1) (a), Colorado Revised Statutes, is
12	amended to read:
13	10-16-106.7. Assignment of health insurance benefits.
14	(1) (a) Any carrier that provides health coverage to a covered person
14 15	(1) (a) Any carrier that provides health coverage to a covered person shall allow, but not require, such covered person under the policy to
15	shall allow, but not require, such covered person under the policy to
15 16	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital,
15 16 17	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital, other licensed health care provider, as defined in section 10-4-902 (3), an
15 16 17 18	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital, other licensed health care provider, as defined in section 10-4-902 (3), an occupational therapist as defined in section 12-40.5-103, C.R.S., or a
15 16 17 18	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital, other licensed health care provider, as defined in section 10-4-902 (3), an occupational therapist as defined in section 12-40.5-103, C.R.S., or a massage therapist as defined in section 12-35.5-103 (8), C.R.S., also
15 16 17 18 19 20	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital, other licensed health care provider, as defined in section 10-4-902 (3), an occupational therapist as defined in section 12-40.5-103, C.R.S., or a massage therapist as defined in section 12-35.5-103 (8), C.R.S., also referred to in this section as the "provider", for services provided to the
15 16 17 18 19 20 21	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital, other licensed health care provider, as defined in section 10-4-902 (3), an occupational therapist as defined in section 12-40.5-103, C.R.S., or a massage therapist as defined in section 12-35.5-103 (8), C.R.S., also referred to in this section as the "provider", for services provided to the covered person that are covered under the policy.
15 16 17 18 19 20 21 22	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital, other licensed health care provider, as defined in section 10-4-902 (3), an occupational therapist as defined in section 12-40.5-103, C.R.S., or a massage therapist as defined in section 12-35.5-103 (8), C.R.S., also referred to in this section as the "provider", for services provided to the covered person that are covered under the policy.  SECTION 24. Specified effective date. This act shall take effect
15 16 17 18 19 20 21 22 23	shall allow, but not require, such covered person under the policy to assign, in writing, payments due under the policy to a licensed hospital, other licensed health care provider, as defined in section 10-4-902 (3), an occupational therapist as defined in section 12-40.5-103, C.R.S., or a massage therapist as defined in section 12-35.5-103 (8), C.R.S., also referred to in this section as the "provider", for services provided to the covered person that are covered under the policy.  SECTION 24. Specified effective date. This act shall take effect July 1, 2010.

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