**First Regular Session**

**Seventy-second General Assembly**

**STATE OF COLORADO**

INTRODUCED

LLS NO. 19-XXXX.01 \_\_\_\_\_\_\_\_\_\_\_ xXXXX HOUSE BILL 19-XXXX

**HOUSE SPONSORSHIP**

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**House Committees Senate Committees**

**A BILL FOR AN ACT**

**CONCERNING ACCESS TO BEHAVIORAL HEALTH SERVICES, AND REQUIRING HEALTH INSURERS TO REPORT ON MENTAL HEALTH PARITY COMPLIANCE, AND TO ESTABLISH COVERAGE REQUIREMENTS FOR MEDICATIONS FOR THE TREATMENT OF SUBSTANCE USE DISORDERS.**

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://leg.colorado.gov.)

**Section 1** of the bill requires health insurers to report on issues related to mental health parity requirements.

**Section 2** of the bill establishes coverage requirements for medications used for the treatment of substance use disorders.

***Capital letters or bold & italic numbers indicate new material to be added to existing statute.***

***Dashes through the words indicate deletions from existing statute.***

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

**SECTION 1.** In Colorado Revised Statutes, add 10-16-148 as follows:

**10-16-148. Parity reporting – carriers.** (1) ALL CARRIERS THAT OFFER HEALTH BENEFIT PLANS SUBJECT TO 10-16-104(5.5) MUST SUBMIT A REPORT TO THE COMMISSIONER ON OR BEFORE JANUARY 1 EACH YEAR BEGINNING IN 2019 THAT CONTAINS THE FOLLOWING INFORMATION:

(a) A DESCRIPTION OF THE PROCESS USED TO DEVELOP OR SELECT THE MEDICAL NECESSITY CRITERIA FOR MENTAL HEALTH AND SUBSTANCE USE DISORDER BENEFITS AND THE PROCESS USED TO DEVELOP OR SELTECT THE MEDICAL NECESSITY CRITERIA FOR MEDICAL AND SURGICAL BENEFITS;

(b) IDENTIFICATION OF ALL NONQUANTITATIVE TREATMENT LIMITATIONS (NQTLS) THAT ARE APPLIED TO BOTH MENTAL HEALTH AND SUBSTANCE USE DISORDER BENEFITS AND MEDICAL AND SURGICAL BENEFITS WITHIN EACH CLASSIFICATION OF BENEFITS; THERE MAY BE NO SEPARATE NQTLS THAT APPLY TO MENTAL HEALTH AND SUBSTANCE USE DISORDER BENEFITS BUT DO NOT APPLY TO MEDICAL AND SURGICAL BENEFITS WITHIN ANY CLASSIFICATION OF BENEFITS;

(c) THE RESULTS OF ANALYSES DEMONSTRATING THAT FOR THE MEDICAL NECESSITY CRITERIA DESCRIBED IN PARAGRAPH (a) AND EACH NQTL IDENTIFIED IN PARAGPRAH (b), AS WRITTEN AND IN OPERATION, THE PROCESSES, STRATEGIES, EVIDENTIARY STANDARDS, OR OTHER FACTORS USED IN APPLYING THE MEDICAL NECESSITY CRITERIA AND EACH NQTL TO MENTAL HEALTH AND SUBSTANCE USE DISORDER BENEFITS WITHIN EACH CLASSIFICATION OF BENEFITS ARE COMPARABLE TO, AND ARE APPLIED NO MORE STRINGENTLY THAN, THE PROCESSES, STRATEGIES, EVIDENTIARY STANDARDS, OR OTHER FACTORS USED IN APPLYING THE MEDICAL NECESSITY CRITERIA AND EACH NQTL TO MEDICAL AND SURGICAL BENEFITS WITHIN THE CORRESPONDING CLASSIFICATION OF BENEFITS; AT A MINIMUM, THE RESULTS OF THESES ANALYSES SHALL:

(I) IDENTIFY THE FACTORS USED TO DETERMINE THAT AN NQTL WILL APPLY TO A BENEFIT, INCLUDING FACTORS THAT WERE CONSIDERED BUT REJECTED;

(II) IDENTIFY AND DEFINE THE SPECIFIC EVIDENTIARY STANDARDS USED TO DEFINE THE FACTORS AND ANY OTHER EVIDENCE RELIED UPON IN DESIGNING EACH NQTL;

(III) PROVIDE THE COMPARATIVE ANALYSES, INCLUDING THE RESULTS OF THE ANALYSES, PERFORMED TO DETERMINE THAT THE PROCESSES AND STRATEGIES USED TO DESIGN EACH NQTL, AS WRITTEN, AND THE WRITTEN PROCESSES AND STRATEGIES USED TO APPLY EACH NQTL FOR MENTAL HEALTH AND SUBSTANCE USE DISORDER BENEFITS ARE COMPARABLE TO, AND ARE APPLIED NO MORE STRINGENTLY THAN, THE PROCESSES AND STRATEGIES USED TO DESIGN AND APPLY EACH NQTL, AS WRITTEN, AND THE WRITTEN PROCESSES AND STRATEGIES USED TO APPLY EACH NQTL FOR MEDICAL AND SURGICAL BENEFITS;

(IV) PROVIDE THE COMPARATIVE ANALYSES, INCLUDING THE RESULTS OF THE ANALYSES, PERFORMED TO DETERMINE THAT THE PROCESSES AND STRATEGIES USED TO APPLY EACH NQTL, IN OPERATION, FOR MENTAL HEALTH AND SUBSTANCE USE DISORDER BENEFITS ARE COMPARABLE TO, AND ARE APPLIED NO MORE STRINGENTLY THAN, THE PROCESSES AND STRATEGIES USED TO APPLY EACH NQTL, IN OPERATION, FOR MEDICAL AND SURGICAL BENEFITS; AND

(V) DISCLOSE THE SPECIFIC FINDINGS AND CONCLUSIONS REACHED BY THE CARRIER THAT THE RESULTS OF THE ANALYSES ABOVE INDICATE THAT EACH HEALTH BENEFIT PLAN OFFERED BY THE CARRIER IS IN COMPLIANCE WITH THIS SECTION AND THE MENTAL HEALTH PARITY AND ADDICTION EQUITY ACT OF 2008 AND ITS IMPLEMENTING REGULATIONS, WHICH INCLUDES 45 CFR 146.136 AND 45 CFR 147.160.

**SECTION 2.** In Colorado Revised Statutes, add 10-16-149 as follows:

10-16-149. Medication-assisted treatment – carriers. (1) EACH CARRIER THAT PROVIDES PRESCRIPTION DRUG BENEFITS FOR THE TREATMENT OF SUBSTANCE USE DISORDERS SHALL:

(a) NOT IMPOSE ANY PRIOR AUTHORIZATION REQUIREMENTS ON ANY PRESCRIPTION MEDICATION APPROVED BY THE FEDERAL FOOD AND DRUG ADMINISTRATION (FDA) FOR THE TREATMENT OF SUBSTANCE USE DISORDERS;

(b) NOT IMPOSE ANY STEP THERAPY REQUIREMENTS BEFORE THE CARRIER WILL AUTHORIZE COVERAGE FOR A PRESCRIPTION MEDICATION APPROVED BY THE FDA FOR THE TREATMENT OF SUBSTANCE USE DISORDERS;

(c) PLACE ALL PRESCRIPTION MEDICATIONS APPROVED BY THE FDA FOR THE TREATMENT OF SUBSTANCE USE DISORDERS ON THE LOWEST TIER OF THE DRUG FORMULARY DEVELOPED AND MAINTAINED BY THE INSURER.

(d) NOT EXCLUDE COVERAGE FOR ANY PRESCRIPTION MEDICATION APPROVED BY THE FDA FOR THE TREATMENT OF SUBSTANCE USE DISORDERS AND ANY ASSOCIATED COUNSELING OR WRAPARAOUND SERVICES ON THE GROUNDS THAT SUCH MEDICATIONS AND SERVICES WERE COURT ORDERED.