

Bills that Impact HCPF

BILL [HB15-1186](#)

Sponsors: YOUNG / STEADMAN

Short Title: Services For Children with Autism

Joint Budget Committee. The bill increases the age limit for children receiving services under the autism waiver program from 6 years of age to 8 years of age. The current cap on the annual dollar amount of services that may be provided to a child in the program of \$25,000 is removed and will, instead, be set annually by the medical services board based upon the general assembly's appropriations. The bill states that it is the intent of the general assembly that there will be no waiting list for services for eligible children who apply for the waiver program, so the bill removes language about prioritizing placement in the waiver program. Finally, the bill increases the frequency of program evaluation to an annual evaluation of the effectiveness of the services provided to children pursuant to the waiver program in meeting the goals of the waiver program. The bill appropriates general fund moneys and moneys from the Colorado autism treatment fund for administration, medical services premiums, and behavioral health capitation payments. In addition, federal funds are expected to be available for the same purposes.

BILL [HB15-1233](#)

Sponsors: LANDGRAF / AGUILAR

Short Title: Respite Care Study Task Force

The bill creates the respite care task force to study the dynamics of supply and demand with regard to respite care services in Colorado. The majority and minority leadership of the Senate and House of Representatives shall appoint 9 members to the task force, who shall serve without compensation. The department of human services is directed to provide staff support to the task force. Several Departments, including HCPF, will be voting task force members. The task force is required to submit a report to the general assembly by December 1, 2015.

BILL [HB15-1309](#)

Sponsors: GINAL / CROWDER

Short Title: Protective Restorations By Dental Hygienists

The bill allows a dental hygienist to apply to the Colorado dental board for a permit to place interim therapeutic restorations (ITRs). A dental hygienist who meets the following requirements is eligible to receive a permit to place ITRs:

- * Holds a license in good standing to practice dental hygiene;
- * Carries professional liability insurance;
- * Completes the required hours of dental hygiene practice; and
- * Completes a board-approved course based on uniform standards developed by an ITR advisory committee.

To the extent that state medicaid or children's basic health plan reimbursement is available for the placement of ITRs, the reimbursement will extend to services provided via telehealth in connection with the placement of an ITR. The bill establishes the interim therapeutic restorations advisory committee to develop uniform standards for training dental hygienists to place ITRs.

BILL [HB15-1318](#)

Sponsors: YOUNG / GRANTHAM

Short Title: Consolidate Adult Intellectual and Developmental Disability Waivers

Joint Budget Committee. The bill requires the department of health care policy and financing (state department) to administer medicaid home- and community-based services to adults with intellectual and developmental disabilities pursuant to a single waiver, effective July 1, 2016, or as soon as the state department receives federal authorization for a single consolidated waiver. The state department shall report to the joint budget committee concerning the status of federal approval of the single consolidated waiver. The bill requires the state department in collaboration with community-centered boards and other stakeholders to develop a plan, no later than July 1, 2016, for the delivery of conflict-free case management services and a reasonable timeline for implementation of the plan. The state department will report to the joint budget committee concerning the plan and any necessary statutory changes to implement the plan. The bill appropriates moneys from the developmental disabilities services cash fund to implement the bill and assumes the receipt of federal funds for the same purpose.

BILL [HB15-1367](#)

Sponsors: HAMNER / STEADMAN

Short Title: Retail Marijuana Taxes

Joint Budget Committee. If necessary, the bill refers a ballot issue to the voters at the November 3, 2015, statewide election to allow the state to retain and spend state revenues that would otherwise be refunded for exceeding an estimate included in the ballot information booklet for proposition AA, which was the referendum by which voters approved retail marijuana taxes. If voters reject the ballot issue, then the moneys will be refunded as follows based on current projections:

* \$500,000 for the Department of Health Care Policy and Financing to competitively grant by July 1, 2016 to an organization that to provide evidenced based training and outreach to health professionals statewide related to screening, brief intervention, and referral to treatment for individuals at risk of substance abuse.

BILL [HB15-1368](#)

Sponsors: YOUNG / GRANTHAM

Short Title: Cross-system Response Pilot for Persons with Intellectual and Developmental Disabilities

Joint Budget Committee. The bill establishes the cross-system response for behavioral health crises pilot program (pilot program) to provide crisis intervention, stabilization, and follow-up services to

individuals who have both an intellectual or developmental disability and a mental health or behavioral disorder and who also require services not available through an existing home- or community-based services waiver or not covered under the Colorado behavioral health care system. The pilot program will begin on or before March 1, 2016, and will consist of multiple sites that represent different geographic areas of the state. The pilot program shall:

- * Provide access to intensive coordinated psychiatric, behavioral, and mental health services as an alternative to emergency department care or in-patient hospitalization;
- * Offer community-based, mobile supports to individuals with dual diagnoses and their families;
- * Offer follow-up supports to individuals with dual diagnoses, families, and caregivers to reduce the likelihood of future crises;
- * Provide education and training for families and service agencies;
- * Provide data about the cost in Colorado of providing such services throughout the state; and
- * Provide data about systemic structural changes needed to remove existing regulatory or procedural barriers to the authorized use of public funds across systems, including the medicaid state plan, home- and community-based service medicaid waivers, and the capitated mental health system. The department of health care policy and financing (department) shall conduct a cost-analysis study related to the services that would need to be added to eliminate service gaps and ensure that individuals with intellectual and developmental disabilities are fully included in the Colorado behavioral health system. The department shall also provide recommendations for eliminating the service gap. The cross-system response for behavioral health crises pilot program fund is established.

BILL SB15-011

Sponsors: TODD / PRIMAVERA

Short Title: Reauthorize Pilot Program Spinal Cord Injury Alternative Medicine

The bill extends the repeal date for the pilot program providing complementary and alternative medicine to certain individuals with spinal cord injuries. The bill requires the Department to not limit enrollment into the waiver. In addition, the bill extends the date for the independent evaluation of the pilot program.

BILL SB15-137

Sponsors: BALMER / DELGROSSO

Short Title: PACE Program Flexibility For Business Entity

Under current law, nonprofit organizations are authorized to offer the program of all-inclusive care for the elderly (PACE program). If permitted by federal law, the bill authorizes public, private, and for-profit entities, in addition to nonprofit entities, to provide the PACE program.

BILL SB15-228

Sponsors: STEADMAN / RANKIN

Short Title: Medicaid Provider Rate Review

Joint Budget Committee. The bill establishes a process for the department of health care policy and financing (department) to review provider fee rates. It requires the department to establish a

schedule of rates to be reviewed so that every rate is reviewed every 5 years. It authorizes out-of-cycle review of rates at the request of the joint budget committee (JBC) or the medicaid provider rate review advisory committee (committee) established pursuant to the bill. In reviewing rates, the department first conducts an analysis of the access, services, quality, and utilization of the service and provides a report to the JBC and the committee. The department then conducts a review of the report, including public meetings, with stakeholders. The department works with the office of state planning and budgeting to develop recommendations within the overall state budget. Finally, the department submits a report to the JBC on the review and its recommendations on or before November 1 of each year. The bill requires leadership in both houses to appoint members of the committee and establishes duties for the committee.
