

# Legislative changes for Colorado

Effective at plan renewal on or after January 1, 2024

In early 2023, Colorado’s legislative session made changes that could affect your health plan at renewal. We’ve summarized the details below to make it easier to understand.

## Changes to definitions

Audience segment	Legislative update	Effective date	Details
<p><b>Individual (IND)/ Small Group (SG)</b></p>	<p><b>HB23-1224</b> Standardized health benefit plan</p> <p>Colorado Option updates and Connect for Health Colorado shopping modifications</p>	<p>May 2023</p>	<ul style="list-style-type: none"> <li>Changes the way plans are displayed on the state exchange portal to “improve the value shopping experience for consumers,” meaning the Colorado Option plan may be placed more prominently.</li> <li>Codifies the existing authority of the Department of Insurance (DOI) to limit carrier profit and administrative expenses through the rate filing process.</li> <li>Makes changes to the structure of the Colorado Option hearing processes.</li> </ul>
<p><b>IND/Large Group (LG)/SG/student health plan (SHP)</b></p>	<p><b>HB23-195</b> Calculation of contributions to meet cost sharing</p>	<p>January 1, 2025</p>	<ul style="list-style-type: none"> <li>Requires that health insurers or pharmacy benefit managers (PBM) include a covered person’s contributions toward cost-sharing requirements when determining the cost of a prescription drug that does not have a generic equivalent or has been approved to use. Contributions can include:               <ul style="list-style-type: none"> <li>Annual limits on a covered person’s out-of-pocket costs.</li> <li>Payments made for a prescription drug.</li> </ul> </li> </ul>



Audience segment	Legislative update	Effective date	Details
IND/LG/SG	<b>HB23-1227</b> Enforce laws against pharmacy benefit managers	August 10, 2023	Applies the <a href="#">commissioner's normal enforcement authority (PDF)</a> to several PBM requirements already being used.
IND/SG	<b>CO 2023 Amended Regulation 4-2-43</b> Enrollment periods relating to individual and group health benefit plans	Multiple compliance dates: April 1, 2023 June 1, 2023 January 1, 2024	<ul style="list-style-type: none"> <li>Creates rules for enrollment periods for individual and group health benefit plans to adhere to the Affordable Care Act.</li> <li>New special enrollment period triggers have been added for pregnancy and those people who become ineligible under Medicaid.</li> </ul>

## Changes to coverage or access for drugs or medical devices

Audience segment	Legislative update	Effective date	Details
LG/SG/SHP	<b>HB23-1002</b> Epinephrine auto-injectors	January 1, 2024	<ul style="list-style-type: none"> <li>Caps the total amount that a covered person is required to pay for all prescription epinephrine auto-injectors (EpiPens): not more than \$60 for a 2-pack.</li> <li>Creates an affordability program to provide low-cost epinephrine auto-injectors to certain people.</li> </ul>
LG/SG	<b>HB23-1136</b> Prosthetic devices for recreational activity	LG: January 1, 2025 SG: TBD	<ul style="list-style-type: none"> <li>Provides coverage for an additional prosthetic device for a covered person under 26 years of age, if their doctor deems it necessary, for: <ul style="list-style-type: none"> <li>Physical and recreational activity.</li> <li>Maximizing the person's upper-limb functions.</li> </ul> </li> </ul>
IND/LG/SG/SHP	<b>HB23-1130</b> Drug coverage for serious mental illness	January 1, 2025	<ul style="list-style-type: none"> <li>Stops step-therapy protocols from requiring a person to try more than one prescription drug for serious mental health disorders before being covered for the drug recommended by their doctor.</li> </ul>

Audience segment	Legislative update	Effective date	Details
IND/LG/SG/SHP	<p><b>HB21-1307</b>  <b>CO 2023 Amended Regulation 4-2-68</b>            Prescription insulin drug cost sharing and limitations</p>	March 17, 2023	<ul style="list-style-type: none"> <li>Clarifies that the mandate applies to health savings account (HSA) plans and the deductible is waived.</li> <li>\$100 cap for prescription insulin applies to all covered prescription insulin drugs, regardless of the amount, type of insulin, or the number of prescriptions received by the covered person for their entire 30-day supply.</li> </ul>
IND/SG	<p><b>CO 2023 Bulletin B-4.130</b>            Colorado Option Standardized health benefit plan coverage of diabetic supplies; applicable to Colorado Option Standardized plans only</p>	January 1, 2023	<ul style="list-style-type: none"> <li>Provides information to change Colorado Option Standardized plans to meet Colorado Emergency Regulation 23-E-01 and Amended Regulation 4-2-81.</li> <li>Consumers must have a \$0 cost share for diabetic supplies, such as continuous glucose monitors.</li> </ul>
IND/LG/SG/SHP	<p><b>SB23-176</b>            Protections for people with an eating disorder</p>	January 1, 2024	<ul style="list-style-type: none"> <li>Stops health benefit plans or the state medical assistance program from using certain measurements when determining medical necessity criteria or appropriate level of care for a person with a diagnosed eating disorder, such as:               <ul style="list-style-type: none"> <li>Body mass index.</li> <li>Ideal body weight.</li> <li>Any other standard requiring an achieved weight.</li> </ul> </li> </ul>
IND/LG/SG/SHP	<p><b>SB23-188</b>            Protections for accessing reproductive healthcare</p>	April 14, 2023	<ul style="list-style-type: none"> <li>Creates protections for healthcare providers (HCPs) who perform legally protected reproductive healthcare activities in Colorado.</li> <li>Prevents a health insurer from taking an adverse action against a care provider, including refusing to pay for a provided service, terminating or refusing to renew a contract with the HCP, or imposing other penalties on the care provider.</li> </ul>

Audience segment	Legislative update	Effective date	Details
IND/LG/SG/SHP	<p><b>SB23-189</b> Increase access to reproductive healthcare</p>	<p>LG: January 1, 2025 IND/SG/SHP: pending</p>	<ul style="list-style-type: none"> <li>• Creates coverage for human immunodeficiency virus (HIV) preventive drugs.</li> <li>• Stops a carrier from imposing deductibles, copays, coinsurance, annual or lifetime maximum benefits, or other cost sharing on coverage for sexually transmitted infection treatment or sterilization.</li> <li>• Prevents the use of preapproval and step therapy for prescribed HIV treatment drugs.</li> <li>• Requires large employer plans to provide coverage for the total cost of abortion care, without policy deductibles, copays, or coinsurance.</li> <li>• <b>Individual and Small Group plans must provide this coverage if the federal Department of Health and Human Services confirms the state's determination that the coverage is not subject to state defrayal pursuant to federal law.</b> Final determination is pending.</li> </ul>
IND/LG/SG/SHP	<p><b>SB23-284</b> Ensure 12-month contraception coverage</p>	<p>August 8, 2023</p>	<ul style="list-style-type: none"> <li>• Provides coverage and reimbursement for a care provider to supply contraception intended to last for 12 months, as permitted by the covered person's prescription.</li> </ul>



## We are here if you have questions

To learn more, contact your Anthem Sales representative.