

SB 25-118: HEALTH INSURANCE PRENATAL CARE NO COST SHARING

Prime Sponsors: Fiscal Analyst:

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Fiscal note status: The fiscal note reflects the introduced bill.

Summary Information

Overview. The bill prohibits state-regulated insurance plans from imposing cost sharing requirements on maternity coverage.

Types of impacts. The bill is projected to affect the following areas on an ongoing basis:

Minimal State Workload

Appropriations. No appropriation is required.

Table 1 State Fiscal Impacts

Type of Impact	Budget Year FY 2025-26	Out Year FY 2026-27
State Revenue	\$0	\$0
State Expenditures	\$0	\$0
Transferred Funds	\$0	\$0
Change in TABOR Refunds	\$0	\$0
Change in State FTE	0.0 FTE	0.0 FTE

Summary of Legislation

The bill prohibits state-regulated insurance plans from imposing cost sharing requirements on maternity coverage. This requirement applies to prenatal care, including regular office visits, screenings, testing, and monitoring services.

State Expenditures

The bill minimally increases workload for the Department of Regulatory Agencies and potentially affects costs for state-regulated insurance plans offered through the state.

Insurance Regulation

Workload will minimally increase in the Department of Regulatory Agencies (DORA) to review rate and form filing for private insurance companies to ensure that no cost-sharing is applied to maternity coverage. DORA already reviews these rates for compliance with other maternity coverage requirements, so this workload increase will be minimal.

State Employee Insurance

State employee insurance is offered through two carriers, one of which (Kaiser Permanente) is subject to state regulation and would be required to comply with the requirements in the bill. Reduced cost sharing from patients contributes to higher costs paid by insurers, and thus potentially higher insurance premiums, which would be shared by state agencies and employees. Because insurance premiums are influenced by a number of variables and the premium costs shared between the state and employees has not been determined for future fiscal years, a cost to the state is not estimated.

Children's Health Plan Plus

While the bill does not apply to Medicaid, it does apply to Children's Health Plan Plus (CHP+), which is operated by the Department of Health Care Policy and Financing (HCPF). There is no impact to HCPF because CHP+ does not currently impose cost sharing requirements on maternity coverage.

Effective Date

The bill takes effect 90 days following adjournment of the General Assembly sine die, assuming no referendum petition is filed.

State and Local Government Contacts

Health Care Policy and Financing

Regulatory Agencies

The revenue and expenditure impacts in this fiscal note represent changes from current law under the bill for each fiscal year. For additional information about fiscal notes, please visit the <u>General Assembly website</u>.