Second Regular Session Seventy-first General Assembly STATE OF COLORADO

INTRODUCED

LLS NO. 18-0257.01 Brita Darling x2241

HOUSE BILL 18-1007

HOUSE SPONSORSHIP

Kennedy and Singer, Pettersen

SENATE SPONSORSHIP

Lambert and Jahn, Aguilar, Tate

House Committees

101

102

Senate Committees

Public Health Care & Human Services

A BILL FOR AN ACT

CONCERNING PAYMENT ISSUES RELATED TO 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/.)

Opioid and Other Substance Use Disorders Interim Study Committee. The bill requires all individual and group health benefit plans to provide coverage without prior authorization for a five-day supply of buprenorphine for a first request within a 12-month period.

Additionally, all individual and group health benefit plans that cover physical therapy, acupuncture, or chiropractic services shall not

subject those services to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable than those applicable to primary care services under the plan if the covered person has a diagnosis of chronic pain and has or has had a substance use disorder diagnosis.

The bill prohibits carriers from taking adverse action against a provider or from providing financial incentives or disincentives to a provider based solely on a patient satisfaction survey relating to the patient's satisfaction with pain treatment.

The bill clarifies that an "urgent prior authorization request" to a carrier includes a request for authorization of medication-assisted treatment for substance use disorders.

The bill permits a pharmacist who has entered into a collaborative pharmacy practice agreement with one or more physicians to administer injectable medication-assisted treatment for substance use disorders and receive an enhanced dispensing fee for the administration.

The bill prohibits carriers from requiring a covered person to undergo step therapy using a prescription drug or drugs that include an opioid before covering a non-opioid prescription drug recommended by the covered person's provider.

The bill requires the Colorado medical assistance program to authorize reimbursement for a ready-to-use version of intranasal naloxone hydrochloride without prior authorization.

The bill prohibits the requirement that a recipient of medical assistance undergo a step-therapy protocol using a prescription drug containing an opioid prior to authorizing reimbursement for a non-opioid prescription drug recommended by the person's health care provider.

The bill permits a pharmacist who has entered into a collaborative pharmacy practice agreement with one or more physicians to administer injectable medication-assisted treatment for substance use disorders and receive an enhanced dispensing fee under the Colorado medical assistance program for the administration.

The bill requires the department of health care policy and financing and the office of behavioral health in the department of human services to establish rules that standardize utilization management authority timelines for the non-pharmaceutical components of medication-assisted treatment for substance use disorders.

- 1 Be it enacted by the General Assembly of the State of Colorado:
- 2 SECTION 1. In Colorado Revised Statutes, 10-16-104, amend
- 3 (5.5)(a)(III); and **add** (23) as follows:
- 4 10-16-104. Mandatory coverage provisions definitions -

-2- HB18-1007

1	rules. (5.5) Behavioral, mental health, and substance use disorders
2	- rules. (a) (III) (A) EXCEPT AS PROVIDED IN SUBSECTION (5.5)(a)(III)(B)
3	OF THIS SECTION, any preauthorization or utilization review mechanism
4	used in the determination to provide the coverage required by this
5	paragraph (a) SUBSECTION (5.5)(a) must be the same as, or no more
6	restrictive than, that used in the determination to provide coverage for a
7	physical illness. The commissioner shall adopt rules as necessary to
8	implement and administer this subsection (5.5).
9	(B) A HEALTH BENEFIT PLAN SUBJECT TO THIS SUBSECTION (5.5)
10	MUST PROVIDE COVERAGE WITHOUT PRIOR AUTHORIZATION FOR A
11	FIVE-DAY SUPPLY OF BUPRENORPHINE; EXCEPT THAT THIS REQUIREMENT
12	IS LIMITED TO A FIRST REQUEST FOR BUPRENORPHINE IN A TWELVE-MONTH
13	PERIOD.
14	(23) Treatment for pain. (a) ALL INDIVIDUAL AND GROUP
15	HEALTH BENEFIT PLANS THAT PROVIDE A BENEFIT FOR PHYSICAL THERAPY,
16	ACUPUNCTURE, OR CHIROPRACTIC CARE SHALL NOT SUBJECT THOSE
17	SERVICES TO DOLLAR LIMITS, DEDUCTIBLES, COPAYMENTS, OR
18	COINSURANCE PROVISIONS THAT ARE LESS FAVORABLE TO THE COVERED
19	PERSON THAN THE DOLLAR LIMITS, DEDUCTIBLES, COPAYMENTS, OR
20	COINSURANCE PROVISIONS THAT APPLY TO PRIMARY CARE SERVICES IF THE
21	PHYSICAL THERAPY, ACUPUNCTURE, OR CHIROPRACTIC CARE SERVICES
22	ARE AUTHORIZED FOR TREATMENT OF A COVERED PERSON WHO IS
23	DIAGNOSED WITH CHRONIC PAIN AND WHO HAS OR HAS HAD A SUBSTANCE
24	USE DISORDER DIAGNOSIS.
25	(b) This subsection (23) does not apply to supplemental
26	POLICIES COVERING A SPECIFIC DISEASE OR OTHER LIMITED BENEFIT.
27	SECTION 2. In Colorado Revised Statutes, 10-16-121, add

-3- HB18-1007

1	(1)(e) as follows:
2	10-16-121. Required contract provisions in contracts between
3	carriers and providers - definitions. (1) A contract between a carrier
4	and a provider or its representative concerning the delivery, provision
5	payment, or offering of care or services covered by a managed care plan
6	must make provisions for the following requirements:
7	(e) THE CONTRACT MUST CONTAIN A PROVISION THAT STATES THE
8	CARRIER SHALL NOT TAKE AN ADVERSE ACTION AGAINST A PROVIDER OR
9	PROVIDE FINANCIAL INCENTIVES OR SUBJECT THE PROVIDER TO FINANCIAL
10	DISINCENTIVES BASED SOLELY ON A PATIENT SATISFACTION SURVEY OR
11	OTHER METHOD OF OBTAINING PATIENT FEEDBACK RELATING TO THE
12	PATIENT'S SATISFACTION WITH PAIN TREATMENT.
13	SECTION 3. In Colorado Revised Statutes, 10-16-124.5, amend
14	(8)(b) as follows:
15	10-16-124.5. Prior authorization form - drug benefits - rules
16	of commissioner - definitions. (8) As used in this section:
17	(b) "Urgent prior authorization request" means:
18	(I) A request for prior authorization of a drug benefit that, based
19	on the reasonable opinion of the prescribing provider with knowledge of
20	the covered person's medical condition, if determined in the time allowed
21	for nonurgent prior authorization requests, could:
22	(I) (A) Seriously jeopardize the life or health of the covered
23	person or the ability of the covered person to regain maximum function;
24	or
25	(H) (B) Subject the covered person to severe pain that cannot be
26	adequately managed without the drug benefit that is the subject of the
27	prior authorization request; OR

-4- HB18-1007

1	(II) A REQUEST FOR PRIOR AUTHORIZATION FOR
2	MEDICATION-ASSISTED TREATMENT FOR SUBSTANCE USE DISORDERS.
3	SECTION 4. In Colorado Revised Statutes, add 10-16-143.5 as
4	follows:
5	10-16-143.5. Pharmacist reimbursement - substance use
6	disorder - injections. If a pharmacist has entered into a
7	COLLABORATIVE PHARMACY PRACTICE AGREEMENT WITH ONE OR MORE
8	PHYSICIANS PURSUANT TO SECTION 12-42.5-602 TO ADMINISTER INJECTION
9	MEDICATION FOR MEDICATION-ASSISTED TREATMENT FOR SUBSTANCE USE
10	DISORDERS, THE PHARMACIST ADMINISTERING THE DRUG SHALL RECEIVE
11	AN ENHANCED DISPENSING FEE THAT ALIGNS WITH THE ADMINISTRATION
12	FEE PAID TO A PROVIDER IN A CLINICAL SETTING.
13	SECTION 5. In Colorado Revised Statutes, 10-16-145, add (5)
1.4	0.11
14	as follows:
14 15	as follows: 10-16-145. Step therapy - limitations - prohibition -
15	10-16-145. Step therapy - limitations - prohibition -
15 16	10-16-145. Step therapy - limitations - prohibition - definitions. (5) NOTWITHSTANDING SUBSECTION (2) OF THIS SECTION, A
15 16 17	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step
15 16 17 18	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription
15 16 17 18 19	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription drugs containing an opioid before the carrier provides coverage
15 16 17 18 19 20	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription drugs containing an opioid before the carrier provides coverage for a non-opioid prescription drug recommended by the covered
15 16 17 18 19 20 21	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription drugs containing an opioid before the carrier provides coverage for a non-opioid prescription drug recommended by the covered person's provider for the covered person's treatment.
15 16 17 18 19 20 21 22	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription drugs containing an opioid before the carrier provides coverage for a non-opioid prescription drug recommended by the covered person's provider for the covered person's treatment. SECTION 6. In Colorado Revised Statutes, 25.5-5-411, amend
15 16 17 18 19 20 21 22 23	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription drugs containing an opioid before the carrier provides coverage for a non-opioid prescription drug recommended by the covered person's provider for the covered person's treatment. SECTION 6. In Colorado Revised Statutes, 25.5-5-411, amend (4)(b) as follows:
15 16 17 18 19 20 21 22 23 24	10-16-145. Step therapy - limitations - prohibition - definitions. (5) Notwithstanding subsection (2) of this section, a carrier shall not require a covered person to undergo step therapy with a prescription drug or sequence of prescription drugs containing an opioid before the carrier provides coverage for a non-opioid prescription drug recommended by the covered person's provider for the covered person's treatment. SECTION 6. In Colorado Revised Statutes, 25.5-5-411, amend (4)(b) as follows: 25.5-5-411. Medicaid community mental health services -

-5- HB18-1007

1	mechanisms. These cost containment mechanisms may include, but are
2	not limited to, restricting average per member per month utilization
3	growth, restricting unit cost growth, limiting allowable administrative
4	cost, establishing minimum medical loss ratios, or establishing other cost
5	containment mechanisms that the state department determines
6	appropriate.
7	(II) THE STATE DEPARTMENT AND THE OFFICE OF BEHAVIORAL
8	HEALTH IN THE DEPARTMENT OF HUMAN SERVICES, IN COLLABORATION
9	WITH COMMUNITY MENTAL HEALTH SERVICES PROVIDERS, SHALL
10	ESTABLISH RULES THAT STANDARDIZE UTILIZATION MANAGEMENT
11	AUTHORITY TIMELINES FOR THE NON-PHARMACEUTICAL COMPONENTS OF
12	MEDICATION-ASSISTED TREATMENT FOR SUBSTANCE USE DISORDERS.
13	SECTION 7. In Colorado Revised Statutes, add 25.5-5-509 as
14	follows:
15	25.5-5-509. Substance use disorder - prescription drugs - step
16	therapy prohibited - definition. (1) NOTWITHSTANDING ANY
17	PROVISIONS OF THIS PART 5 TO THE CONTRARY, FOR THE TREATMENT OF A
18	SUBSTANCE USE DISORDER, IN PROMULGATING RULES, AND SUBJECT TO
19	ANY NECESSARY FEDERAL AUTHORIZATION, THE STATE BOARD:
20	(a) SHALL AUTHORIZE REIMBURSEMENT FOR A FEDERAL DRUG

SEQUENCE OF PRESCRIPTION DRUGS CONTAINING AN OPIOID BEFORE 26 AUTHORIZING REIMBURSEMENT FOR A NON-OPIOID PRESCRIPTION DRUG 27 RECOMMENDED BY THE MEDICAL ASSISTANCE RECIPIENT'S HEALTH CARE

ADMINISTRATION-APPROVED READY-TO-USE INTRANASAL FORM OF

UNDERGO A STEP-THERAPY PROTOCOL USING A PRESCRIPTION DRUG OR

(b) SHALL NOT REQUIRE A MEDICAL ASSISTANCE RECIPIENT TO

NALOXONE HYDROCHLORIDE WITHOUT PRIOR AUTHORIZATION; AND

21

22

23

24

25

HB18-1007 -6-

1	PROVIDER FOR THAT PERSON'S TREATMENT.
2	SECTION 8. In Colorado Revised Statutes, add 25.5-5-510 as
3	follows:
4	25.5-5-510. Pharmacist reimbursement - substance use
5	disorder - injections. If a pharmacist has entered into a
6	COLLABORATIVE PHARMACY PRACTICE AGREEMENT WITH ONE OR MORE
7	PHYSICIANS PURSUANT TO SECTION 12-42.5-602 TO ADMINISTER INJECTION
8	MEDICATION FOR MEDICATION-ASSISTED TREATMENT FOR SUBSTANCE USE
9	DISORDERS, THE PHARMACIST ADMINISTERING THE DRUG SHALL RECEIVE
10	AN ENHANCED DISPENSING FEE THAT ALIGNS WITH THE ADMINISTRATION
11	FEE PAID TO A PROVIDER IN A CLINICAL SETTING.
12	SECTION 9. Act subject to petition - effective date. This act
13	takes effect January 1, 2019; except that, if a referendum petition is filed
14	pursuant to section 1 (3) of article V of the state constitution against this
15	act or an item, section, or part of this act within the ninety-day period
16	after final adjournment of the general assembly, then the act, item,
17	section, or part will not take effect unless approved by the people at the
18	general election to be held in November 2018 and, in such case, will take
19	effect on January 1, 2019, or on the date of the official declaration of the
20	vote thereon by the governor, whichever is later.

-7-