

HB1269_L.001

HOUSE COMMITTEE OF REFERENCE AMENDMENT

Committee on Public Health Care & Human Services.

HB19-1269 be amended as follows:

- 1 Amend printed bill, page 4, line 13, strike "(5.5)(c), (18)(b)(I), and
2 (18)(d);" and substitute "(5.5)(b), (5.5)(c), and (18)(b)(I);".
- 3 Page 5, strike lines 18 and 19 and substitute "DISORDERS, THE SERVICE
4 CONTINUES TO BE A COVERED SERVICE UNTIL".
- 5 Page 5, line 24, strike "QUANTITATIVE AND".
- 6 Page 5, line 26, strike "(c)(4)(I)," and substitute "(c)(4),".
- 7 Page 6, strike line 2 and substitute "TO THE LIMITATIONS AND EXAMPLES
8 LISTED IN 45 CFR 146.136 (c)(4)(ii) AND (c)(4)(iii), OR ANY".
- 9 Page 6, after line 7 insert:
10 "(B) COMPLY WITH THE FINANCIAL REQUIREMENTS AND
11 QUANTITATIVE TREATMENT LIMITATIONS SPECIFIED IN 45 CFR 146.136
12 (c)(2) AND (c)(3), OR ANY SUCCESSOR REGULATION;".
- 13 Reletter succeeding sub-subparagraphs accordingly.
- 14 Page 6, strike lines 12 through 19.
- 15 Reletter succeeding sub-subparagraphs accordingly.
- 16 Page 7, line 2, strike "REIMBURSE" and substitute "IF A COVERED PERSON
17 OBTAINS A COVERED SERVICE FROM A NONPARTICIPATING PROVIDER
18 BECAUSE THE COVERED SERVICE IS NOT AVAILABLE WITHIN ESTABLISHED
19 TIME AND DISTANCE STANDARDS, REIMBURSE".
- 20 Page 7, after line 8 insert:
21 "(b) The commissioner may adopt rules as necessary to ensure that
22 this subsection (5.5) is implemented and administered in compliance with
23 federal law AND SHALL ADOPT RULES TO ESTABLISH REASONABLE TIME
24 PERIODS FOR VISITS WITH A PROVIDER FOR TREATMENT OF A BEHAVIORAL,
25 MENTAL HEALTH, OR SUBSTANCE USE DISORDER AFTER AN INITIAL VISIT
26 WITH A PROVIDER.".
- 27 Page 8, strike lines 17 through 27.

- 1 Page 9, strike lines 1 through 3.
- 2 Page 9, line 22, after "MHPAEA." add "THE COMMISSIONER SHALL
3 ADOPT RULES TO ESTABLISH THE PROCESS AND TIMELINE FOR CARRIERS TO
4 DEMONSTRATE COMPLIANCE WITH THE MHPAEA IN ESTABLISHING THEIR
5 RATES."
- 6 Page 9, line 27, strike "ALL DENIALS OF" and substitute "UNLESS A DENIAL
7 IS BASED ON NONPAYMENT OF PREMIUMS, A DENIAL OF A REQUEST".
- 8 Page 10, line 1, strike "REQUESTS".
- 9 Page 10, line 3, after "DISORDERS" insert "UNDER A HEALTH BENEFIT
10 PLAN".
- 11 Page 10, line 16, strike "CARRIER," and substitute "CARRIER AND FREE OF
12 CHARGE,".
- 13 Page 11, lines 15 and 16, strike "FOR AN ANNUAL MENTAL WELLNESS
14 CHECKUP THAT" and substitute "AND REIMBURSEMENT FOR BEHAVIORAL
15 HEALTH SCREENINGS USING A VALIDATED SCREENING TOOL FOR
16 BEHAVIORAL HEALTH, WHICH COVERAGE AND REIMBURSEMENT".
- 17 Page 11, line 17, after "COVERAGE" insert "AND REIMBURSEMENT".
- 18 Page 15, line 9, strike "SHALL:" and substitute "SHALL, FOR PRESCRIPTION
19 MEDICATIONS THAT ARE ON THE CARRIER'S FORMULARY:".
- 20 Page 15, line 14, strike "TO AUTHORIZING" and substitute "FOR".
- 21 Page 15, line 17, strike "ALL" and substitute "AT LEAST ONE" and strike
22 "MEDICATIONS" and substitute "MEDICATION".
- 23 Page 17, line 4, strike "DAYS," and substitute "DAYS".
- 24 Page 17, line 10, strike "DIAGNOSIS, AND PROHIBIT" and substitute
25 "DIAGNOSE; AND
26 (i) PROHIBIT".
- 27 Page 17, line 12, after "DISORDER" insert "OR SUBSTANCE USE DISORDER".
- 28 Page 17, line 13, strike "ETIOLOGY; AND" and substitute "ETIOLOGY.".
- 29 Page 17, strike lines 14 through 17.

- 1 Page 17, line 19, before "PUBLIC." insert "AND THE STATE DEPARTMENT'S
- 2 REPORT REQUIRED BY SECTION 25.5-5-421 READILY AVAILABLE TO THE".

- 3 Page 19, strike lines 9 through 27.

- 4 Renumber succeeding sections accordingly.

- 5 Page 20, after line 14 insert:
 - 6 "(a) DATA THAT DEMONSTRATES PARITY COMPLIANCE FOR
 - 7 ADVERSE DETERMINATIONS REGARDING CLAIMS FOR BEHAVIORAL,
 - 8 MENTAL HEALTH, OR SUBSTANCE USE DISORDER SERVICES AND INCLUDES
 - 9 THE TOTAL NUMBER OF ADVERSE DETERMINATIONS FOR SUCH CLAIMS;"

- 10 Reletter succeeding paragraphs accordingly.

- 11 Page 21, line 4, strike "(1)(a)" and substitute "(1)(b)".

- 12 Page 21, line 6, strike "(1)(b)" and substitute "(1)(c)".

- 13 Page 21, line 18, strike "(1)(c)" and substitute "(1)(d)".

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