

Colorado



Colorado - HB 1015

Sponsor: Representative Stephanie Luck (R)

Actions: 03/16/2022 Hearing Scheduled
03/09/2022 Hearing canceled
01/12/2022 Introduced; Referred to House Health and Insurance Committee

Summary: Summary for 1/12/2022 Version

This measure allows prescribers and pharmacists to prescribe FDA-approved therapeutic drugs for the treatment of COVID-19 for off-label use for individual prophylaxis use, at-home patient use, or for inpatient hospital use.

This measure is applicable to physicians, nurses, advanced practice registered nurses, and physician assistants.

This measure allows prescribers to prescribe or dispense, and pharmacists to dispense, a prescription drug order of an FDA-approved therapeutic drug, including hydroxychloroquine sulfate or ivermectin, for off-label use to an individual for prophylaxis or for an at-home patient or hospital inpatient treatment of COVID-19. The use of prophylactic does not require a suspected exposure and at-home early-stage treatment does not require a COVID-19 test. Practice in accordance with this amendment will not be considered unprofessional conduct and will not be the cause for an investigation, inquiry, or disciplinary action.

For this measure, "prescriber" means a physician or physician assistant licensed pursuant to Colorado law or an advanced practice registered nurse.

For this measure, "FDA" means the Food and Drug Administration.

For this measure, "COVID-19" means the coronavirus disease caused by the Severe Acute Respiratory Syndrome Coronavirus 2, also known as SARS-COV-2.

Bill Links [1/12/2022 Version](#)



Colorado - SB 78

Sponsor: Senator Barbara Kirkmeyer (R)

Actions: 02/24/2022 Passed Senate
02/17/2022 Amended
02/15/2022 Hearing held; Passed committee
02/07/2022 Hearing held; Passed committee; Referred to the Senate Appropriations Committee
01/19/2022 Introduced; Referred to Senate Health & Human Services Committee

Summary: Summary for 2/17/2022 Version

This measure institutes an alternative to prior authorization for certain providers.

This measure applies to insurers, utilization review organizations, and pharmacy benefits management firms.

This measure requires health insurance carriers and private utilization review organizations to offer providers who receive approval for prior authorization requests at least a 95% of times requested over a period of 12 months an alternative to prior authorization requirements, including an exemption from the requirements, incentive awards, or other innovative programs, to reward provider compliance.

This measure further requires carriers to offer the same types of alternatives to prior authorization requirements to a provider who has at least a 95% approval rate of prior authorization requests over a 12-month period.

Insurance carriers must inform providers of their status as a qualified provider and provide all data considered as part of its initial examination or re-examination of the provider's prescribing or ordering patterns for the 12 month period. All disagreements regarding a provider's qualified provider status must be resolved in accordance with applicable contract provisions.

This measure defines "same health-care service" as a health-care service that is assigned a unique CPT code or combination of CPT codes which code or combination of codes is used for the care of a patient with a specific diagnosis code.

This measure defines "private utilization review organization" as a private utilization review organization that has a contract with and performs prior authorization on behalf of a carrier.

This measure will take effect 90 days after the adjournment of the general assembly.

Bill Links [2/17/2022 Version](#)
[1/19/2022 Version](#)