

# Changes to Prior Authorization



## Background

With Democrats in charge of both chambers and the governor's office, capitol watchers expected many bills impacting access to care. These expectations were realized and included bills brought by legislators that aimed to increase access through greater insurance requirements. CHA supported bills ensuring private insurance companies are providing value to consumers and not impeding access to necessary medical care, including HB 19-1211, which requires transparency in insurance companies' prior authorization requirements, and HB 19-1301, which expands coverage of additional breast cancer screening and imaging visits after an initial visit.

## HB 19-1211: Prior Authorization Requirements Health Care Services

HB 19-1211 establishes guidelines for health insurance carriers concerning the practice of prior authorization for medical procedures and drug benefits. The requirements apply to most health insurance plans regulated by the Colorado Division of Insurance (DOI) but do not apply to Medicare, Medicaid, military plans or self-insured employer-based health plans.

## What You Need to Know

The bill applies to prior authorization requests for health care services submitted after Jan. 1, 2020. Under the law, health insurance carriers are required to:

- Post current prior authorization requirements on their websites, including the requirements that apply if carriers use a private utilization review organization to review claims;
- Notify providers of any new or amended prior authorization requirements or restrictions – approved prior authorizations are valid for at least 180 days regardless of subsequent changes to requirements or restrictions;
- Post on their websites data regarding approvals and denials of prior authorization requests;
- Respond to nonurgent prior authorization requests within five business days and urgent prior authorization requests within two business days, but not longer than 72 hours; and
- Consider limiting the use of prior authorization to providers whose prescribing or ordering patterns differ significantly from the patterns of their peers.

Health insurance carriers' prior authorization criteria must be based on current, clinically based criteria and must align with other quality initiatives and other carriers' and organizations' prior authorization criteria for the same health care services. DOI will incorporate reviews of prior authorization practices in health insurance carriers' annual health benefit plan filings, and the Commissioner of Insurance may adopt rules to implement this bill.

*This guidance does not constitute legal advice to CHA members or others. Each hospital should consult with legal counsel on these matters and have legal counsel review any policies proposed as a result of this guidance.*



# HB 19-1301: Health Insurance for Breast Imaging

Current law requires DOI-regulated insurance carriers provide coverage for the total cost of certain preventive health care services, including annual breast cancer screenings for certain individuals. HB 19-1301 expands required coverage, applying to policies and contracts issued or renewed on or after Jan. 1, 2021. This bill does not apply to Medicare, Medicaid, military plans or self-insured employer-based health plans.

## What You Need to Know

- Coverage must include a preventive breast cancer screening study that is within appropriate use guidelines as determined by the American College of Radiology or the National Comprehensive Cancer Network.
- For any breast imaging performed after the breast cancer screening study, whether for further evaluation or supplemental imaging, if such imaging is within appropriate use guidelines, covered individuals are not responsible for any cost-sharing amounts.
- DOI-regulated health insurance plans must cover an annual breast cancer screening and appropriate follow-up imaging for all individuals possessing at least one of the following risk factors for breast cancer:
  - A family history of breast cancer;
  - Being 40 years or older; or,
  - An increased lifetime risk of breast cancer determined by a risk factor model.

## Additional Resources

- HB 19-1211: [Final Bill](#) and [Fiscal Note](#)
- HB 19-1211 takes effect Aug. 2, 2019
- HB 19-1301: [Final Bill](#) and [Fiscal Note](#)
- HB 19-1301 takes effect Aug. 2, 2019
- [American College of Radiation Guidelines](#)
- [National Comprehensive Cancer Network Guidelines](#)

For questions or more information, contact Amber Burkhart,  
CHA policy analyst, at 720.330.6028.

