

  
*Colorado Legislative Council Staff Fiscal Note*  
**STATE**  
**REVISED FISCAL IMPACT**  
(replaces fiscal note dated March 12, 2010)

**Drafting Number:** LLS 10-0916 **Date:** April 23, 2010  
**Prime Sponsor(s):** Sen. Hodge; Mitchell **Bill Status:** House Business Affairs and Labor  
 Rep. Gerou; Miklosi **Fiscal Analyst:** Clare Pramuk (303-866-2677)

**TITLE:** CONCERNING FAIRNESS IN WORKERS' COMPENSATION HEALTH CARE PROVIDER REVIEW PROCESSES, AND, IN CONNECTION THEREWITH, REQUIRING PERFORMANCE PROGRAMS TO BE TRANSPARENT, INCLUDE OBJECTIVE AND STANDARDIZED CRITERIA THAT ARE APPLIED CONSISTENTLY, AND PROVIDE MINIMUM DUE PROCESS TO PROVIDERS.

Fiscal Impact Summary	FY 2010-2011	FY 2011-2012
State Revenue		
State Expenditures		
FTE Position Change		
<b>Effective Date:</b> July 1, 2010.		
<b>Appropriation Summary for FY 2010-2011:</b> None required.		
<b>Local Government Impact:</b> None		

**Summary of Legislation**

This *reengrossed* bill creates the Provider Review and Disclosure Act for workers' compensation insurers and health care providers. It specifies minimum standards for insurer performance programs that measure a provider's care. Insurers are required to file detailed descriptions of performance programs with the Director of the Division of Workers' Compensation in the Department of Labor and Employment at least 30 days before implementation. Insurers must give written notice to a provider at least 45 days before disclosing the result of a performance program. If a provider appeals a result, an insurer is required to disclose the data and the process used to arrive at the provider's individual result. The provider has an opportunity to submit or have considered corrected data or other relevant information. A violation is considered an unfair or deceptive act or practice and may be enforced in an administrative hearing, or in a civil action against an insurer.

**State Expenditures**

SB10-178 requires insurers to submit performance programs to the Director of the Division of Workers' Compensation but does not specify that the director review these submissions. It also allows a health care provider to seek to enforce the requirements through a hearing by the director,

an administrative law judge, or in state court. Any increase in workload to the division, the Office of Administrative Courts, or the Judicial Branch is expected to be minimal and can be accomplished within existing appropriations.

**Departments Contacted**

Labor and Employment

Judicial

Personnel and Administration