

**First Regular Session
Sixty-seventh General Assembly
STATE OF COLORADO**

REVISED

*This Version Includes All Amendments Adopted
on Second Reading in the Second House*

LLS NO. 09-0894.01 Debbie Haskins

SENATE BILL 09-244

SENATE SPONSORSHIP

Shaffer B.,

HOUSE SPONSORSHIP

Primavera,

Senate Committees

Health and Human Services
Appropriations

House Committees

Business Affairs and Labor

A BILL FOR AN ACT

101 **CONCERNING HEALTH INSURANCE BENEFITS FOR THE TREATMENT OF**
102 **AUTISM SPECTRUM DISORDERS.**

Bill Summary

(Note: This summary applies to this bill as introduced and does not necessarily reflect any amendments that may be subsequently adopted.)

Directs that all individual and group sickness and accident insurance policies, health service or indemnity contracts, and managed care plans providing coverage in Colorado (policy or policies) that are issued or renewed on or after July 1, 2010, shall provide coverage for the assessment, diagnosis, and treatment of autism spectrum disorders (ASD). Defines what type of coverage is required for the treatment of ASD, including applied behavior analysis. States that nothing in the statute

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
*Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.*

HOUSE
Am ended 2nd Reading
May 1, 2009

SENATE
3rd Reading Unam ended
April 27, 2009

SENATE
Am ended 2nd Reading
April 24, 2009

shall be construed to require or permit a carrier to reduce benefits provided for ASD if a policy already provides coverage that exceeds the requirements of the statute and that nothing shall be construed to prevent an insurance carrier from increasing benefits provided for ASD. States that nothing in the statute shall be construed to limit coverage for physical or mental health benefits covered under a policy.

States that coverage for ASD is subject to the same copayment, deductible, and coinsurance provisions that are applicable under the policy for other medical services for physical injury or sickness covered by the policy. Directs that benefits provided by an insurance carrier for care or treatment of a health condition not diagnosed as ASD are not to be applied toward any ASD maximum benefit amount established under the policy.

Prohibits a carrier from denying or refusing to provide otherwise covered services, refusing to renew or reissue, or otherwise restricting or terminating coverage under a policy to an individual because the individual or his or her dependent is diagnosed with ASD or due to utilization of services for which coverage is mandated. Requires prescribed treatment to be continued during a treatment review or appeal of a decision regarding treatment.

Specifies that services for the treatment of ASD are the primary services for a child who is also eligible for early intervention services, and that early intervention services supplement, but do not replace, services provided under the required coverage for ASD.

Makes issuance or renewal of a policy that excludes coverage for the assessment, diagnosis, and treatment of ASD by an insurance carrier that is subject to the mandated coverage requirement for the treatment for ASD an unfair method of competition and unfair or deceptive act or practice in the business of insurance.

Repeals the statute that provides that treatment for autism was not mandated and, if covered by a policy, was not to be treated as a mental illness.

1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1. Legislative declaration.** The general assembly
3 acknowledges that when mandated coverages are added to private
4 insurance plans that the services covered by the children's basic health
5 plan [REDACTED] are often adjusted and revised to include such mandated
6 coverages. However, the general assembly hereby declares that due to the
7 budgetary issues facing the state of Colorado during fiscal years 2008-09

1 and 2009-10, the general assembly cannot at this time fund an expansion
2 of the children's basic health plan [REDACTED] to include comparable provisions.
3 It is the hope that such program may be able to include comparable
4 services for autism spectrum disorders in the future.

5 **SECTION 2.** 10-16-104 (1.3), Colorado Revised Statutes, is
6 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

7 **10-16-104. Mandatory coverage provisions - definitions.**

8 (1.3) **Early intervention services.** (f) EARLY INTERVENTION SERVICES
9 SHALL BE PROVIDED AS SPECIFIED IN THE ELIGIBLE CHILD'S IFSP, AND
10 SUCH SERVICES SHALL NOT DUPLICATE OR REPLACE TREATMENT FOR
11 AUTISM SPECTRUM DISORDERS PROVIDED IN ACCORDANCE WITH
12 SUBSECTION (1.4) OF THIS SECTION. SERVICES FOR THE TREATMENT OF
13 AUTISM SPECTRUM DISORDERS PROVIDED IN ACCORDANCE WITH
14 SUBSECTION (1.4) OF THIS SECTION SHALL BE CONSIDERED THE PRIMARY
15 SERVICE TO AN ELIGIBLE CHILD, AND EARLY INTERVENTION SERVICES
16 PROVIDED UNDER THIS SUBSECTION (1.3) SHALL SUPPLEMENT, BUT NOT
17 REPLACE, SERVICES PROVIDED UNDER SUBSECTION (1.4) OF THIS SECTION.

18 **SECTION 3.** 10-16-104, Colorado Revised Statutes, is amended
19 BY THE ADDITION OF A NEW SUBSECTION to read:

20 **10-16-104. Mandatory coverage provisions - definitions.**

21 (1.4) **Autism spectrum disorders.** (a) AS USED IN THIS SUBSECTION
22 (1.4), UNLESS THE CONTEXT OTHERWISE REQUIRES:

23 (I) "APPLIED BEHAVIOR ANALYSIS" MEANS THE USE OF BEHAVIOR
24 ANALYTIC METHODS AND RESEARCH FINDINGS TO CHANGE SOCIALLY
25 IMPORTANT BEHAVIORS IN MEANINGFUL WAYS.

26 (II) "AUTISM SERVICES PROVIDER" MEANS ANY PERSON
27 WHO PROVIDES DIRECT SERVICES TO A PERSON WITH AUTISM SPECTRUM

1 DISORDER, IS LICENSED, CERTIFIED, OR REGISTERED BY THE APPLICABLE
2 STATE LICENSING BOARD OR BY A NATIONALLY RECOGNIZED
3 ORGANIZATION, AND WHO MEETS ONE OF THE FOLLOWING:

4 (A) HAS A DOCTORAL DEGREE WITH A SPECIALTY IN PSYCHIATRY,
5 MEDICINE, OR CLINICAL PSYCHOLOGY, IS ACTIVELY LICENSED BY THE
6 STATE BOARD OF MEDICAL EXAMINERS, AND HAS ONE YEAR OF DIRECT
7 EXPERIENCE IN BEHAVIORAL THERAPIES THAT ARE CONSISTENT WITH BEST
8 PRACTICE AND RESEARCH ON EFFECTIVENESS FOR PEOPLE WITH AUTISM
9 SPECTRUM DISORDERS;

10 (B) HAS A DOCTORAL DEGREE IN ONE OF THE BEHAVIORAL OR
11 HEALTH SCIENCES AND HAS COMPLETED ONE YEAR OF EXPERIENCE IN
12 BEHAVIORAL THERAPIES THAT ARE CONSISTENT WITH BEST PRACTICE AND
13 RESEARCH ON EFFECTIVENESS FOR PEOPLE WITH AUTISM SPECTRUM
14 DISORDERS;

15 (C) HAS A MASTER'S DEGREE OR HIGHER IN BEHAVIORAL SCIENCES
16 AND IS NATIONALLY CERTIFIED AS A "BOARD CERTIFIED BEHAVIOR
17 ANALYST" OR CERTIFIED BY A SIMILAR NATIONALLY RECOGNIZED
18 ORGANIZATION;

19 (D) HAS A MASTER'S DEGREE OR HIGHER IN ONE OF THE BEHAVIOR
20 OR HEALTH SCIENCES, IS CREDENTIALLED AS A RELATED SERVICES
21 PROVIDER, AND HAS COMPLETED ONE YEAR OF DIRECT SUPERVISED
22 EXPERIENCE IN BEHAVIORAL THERAPIES THAT ARE CONSISTENT WITH BEST
23 PRACTICE AND RESEARCH ON EFFECTIVENESS FOR PEOPLE WITH AUTISM
24 SPECTRUM DISORDERS. FOR THE PURPOSES OF THIS SUB-SUBPARAGRAPH
25 (D), "RELATED SERVICES PROVIDER" MEANS A PHYSICAL THERAPIST,
26 OCCUPATIONAL THERAPIST, OR SPEECH THERAPIST.

27 (E) HAS A BACCALAUREATE DEGREE OR HIGHER IN BEHAVIORAL

1 SCIENCES AND IS NATIONALLY CERTIFIED AS A "BOARD CERTIFIED
2 ASSOCIATE BEHAVIOR ANALYST" OR CERTIFIED BY A SIMILAR NATIONALLY
3 RECOGNIZED ORGANIZATION.

4 (III) "AUTISM SPECTRUM DISORDERS" OR "ASD" INCLUDES THE
5 FOLLOWING NEUROBIOLOGICAL DISORDERS: AUTISTIC DISORDER,
6 ASPERGER'S DISORDER, AND ATYPICAL AUTISM AS A DIAGNOSIS WITHIN
7 PERVASIVE DEVELOPMENTAL DISORDER NOT OTHERWISE SPECIFIED, AS
8 DEFINED IN THE MOST RECENT EDITION OF THE DIAGNOSTIC AND
9 STATISTICAL MANUAL OF MENTAL DISORDERS, AT THE TIME OF THE
10 DIAGNOSIS.

11 (IV) "HEALTH BENEFIT PLAN" SHALL HAVE THE SAME MEANING AS
12 PROVIDED IN SECTION 10-16-102 (21). IN ADDITION, THE TERM "HEALTH
13 BENEFIT PLAN", AS USED IN THIS SUBSECTION (1.4), EXCLUDES
14 SHORT-TERM LIMITED DURATION HEALTH INSURANCE POLICIES AS DEFINED
15 IN SECTION 10-16-102 (21) (b). "HEALTH BENEFIT PLAN", AS USED IN THIS
16 SUBSECTION (1.4), DOES NOT INCLUDE INDIVIDUAL HEALTH BENEFIT
17 PLANS.

18 (V) "INDIVIDUALIZED EDUCATION PLAN" SHALL HAVE THE SAME
19 MEANING AS PROVIDED IN SECTION 22-20-103, C.R.S.

20 (VI) "INDIVIDUALIZED FAMILY SERVICE PLAN" SHALL HAVE THE
21 SAME MEANING AS PROVIDED IN SECTION 27-10.5-102, C.R.S.

22 (VII) "INDIVIDUALIZED PLAN" SHALL HAVE THE SAME MEANING AS
23 PROVIDED IN SECTION 27-10.5-102, C.R.S.

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25 (VIII) "PHARMACY CARE" MEANS MEDICATIONS PRESCRIBED BY A
26 PHYSICIAN LICENSED BY THE STATE BOARD OF MEDICAL EXAMINERS
27 UNDER THE "COLORADO MEDICAL PRACTICE ACT", ARTICLE 36 OF TITLE

1 12, C.R.S.

2 ==

3 (IX) "PSYCHIATRIC CARE" MEANS DIRECT OR CONSULTATIVE
4 SERVICES PROVIDED BY A PSYCHIATRIST LICENSED BY THE STATE BOARD
5 OF MEDICAL EXAMINERS UNDER THE "COLORADO MEDICAL PRACTICE
6 ACT", ARTICLE 36 OF TITLE 12, C.R.S.

7 (X) "PSYCHOLOGICAL CARE" MEANS DIRECT OR CONSULTATIVE
8 SERVICES PROVIDED BY A PSYCHOLOGIST LICENSED BY THE STATE BOARD
9 OF PSYCHOLOGIST EXAMINERS PURSUANT TO PART 3 OF ARTICLE 43 OF
10 TITLE 12, C.R.S., OR A SOCIAL WORKER LICENSED BY THE STATE BOARD OF
11 SOCIAL WORK EXAMINERS PURSUANT TO PART 4 OF ARTICLE 43 OF TITLE
12 12, C.R.S.

13 (XI) "THERAPEUTIC CARE" MEANS SERVICES PROVIDED BY A
14 SPEECH THERAPIST, AN OCCUPATIONAL THERAPIST REGISTERED TO
15 PRACTICE OCCUPATIONAL THERAPY PURSUANT TO ARTICLE 40.5 OF TITLE
16 12, C.R.S., A PHYSICAL THERAPIST LICENSED TO PRACTICE PHYSICAL
17 THERAPY PURSUANT TO ARTICLE 41 OF TITLE 12, C.R.S., OR AN AUTISM
18 SERVICES PROVIDER. "THERAPEUTIC CARE" INCLUDES, BUT IS NOT LIMITED
19 TO, SPEECH, OCCUPATIONAL, AND APPLIED BEHAVIOR ANALYTIC AND
20 PHYSICAL THERAPIES.

21 (XII) "TREATMENT FOR AUTISM SPECTRUM DISORDERS" SHALL BE
22 FOR TREATMENTS THAT ARE MEDICALLY NECESSARY, APPROPRIATE,
23 EFFECTIVE, OR EFFICIENT. THE TREATMENTS LISTED IN THIS
24 SUBPARAGRAPH (XII) ARE NOT CONSIDERED EXPERIMENTAL OR
25 INVESTIGATIONAL AND ARE CONSIDERED APPROPRIATE, EFFECTIVE, OR
26 EFFICIENT FOR THE TREATMENT OF AUTISM. "TREATMENT FOR AUTISM
27 SPECTRUM DISORDERS" SHALL INCLUDE THE FOLLOWING:

1 (A) EVALUATION AND ASSESSMENT SERVICES;

2 (B) BEHAVIOR TRAINING AND BEHAVIOR MANAGEMENT AND
3 APPLIED BEHAVIOR ANALYSIS, INCLUDING BUT NOT LIMITED TO
4 CONSULTATIONS, DIRECT CARE, SUPERVISION, OR TREATMENT, OR ANY
5 COMBINATION THEREOF, FOR AUTISM SPECTRUM DISORDERS PROVIDED BY
6 AUTISM SERVICES PROVIDERS.

7 (C) HABILITATIVE OR REHABILITATIVE CARE, INCLUDING, BUT NOT
8 LIMITED TO, OCCUPATIONAL THERAPY, PHYSICAL THERAPY, OR SPEECH
9 THERAPY, OR ANY COMBINATION OF THOSE THERAPIES. FOR A PERSON
10 WHO IS ALSO COVERED UNDER SUBSECTION (1.7) OF THIS SECTION, THE
11 LEVEL OF BENEFITS FOR OCCUPATIONAL THERAPY, PHYSICAL THERAPY, OR
12 SPEECH THERAPY SHALL EXCEED THE LIMIT OF TWENTY VISITS FOR EACH
13 THERAPY IF SUCH THERAPY IS MEDICALLY NECESSARY TO TREAT AUTISM
14 SPECTRUM DISORDERS UNDER THIS SUBSECTION (1.4).

15 (D) PHARMACY CARE AND MEDICATION, IF COVERED BY THE
16 HEALTH BENEFIT PLAN;

- 17 (E) PSYCHIATRIC CARE;
- 18 (F) PSYCHOLOGICAL CARE, INCLUDING FAMILY COUNSELING; AND
- 19 (G) THERAPEUTIC CARE.

20 (XIII) "TREATMENT PLAN" MEANS A PLAN DEVELOPED FOR AN
21 INDIVIDUAL BY AN ■ ■ ■ AUTISM SERVICES PROVIDER AND PRESCRIBED BY A
22 LICENSED PHYSICIAN OR A LICENSED PSYCHOLOGIST PURSUANT TO A
23 COMPREHENSIVE EVALUATION OR REEVALUATION FOR AN INDIVIDUAL
24 CONSISTING OF THE INDIVIDUAL'S DIAGNOSIS; PROPOSED TREATMENT BY
25 TYPE, FREQUENCY, AND ANTICIPATED TREATMENT; THE ANTICIPATED
26 OUTCOMES STATED AS GOALS; AND THE FREQUENCY BY WHICH THE
27 TREATMENT PLAN WILL BE UPDATED. ■ ■ ■ THE TREATMENT PLAN

1 SHALL BE DEVELOPED IN ACCORDANCE WITH THE PATIENT-CENTERED
2 MEDICAL HOME AS DEFINED IN SECTION 25.5-1-103 (5.5), C.R.S.

3 (b) (I) ON OR AFTER JULY 1, 2010, ALL HEALTH BENEFIT PLANS
4 ISSUED OR RENEWED IN THIS STATE SHALL PROVIDE COVERAGE FOR THE
5 ASSESSMENT, DIAGNOSIS, AND TREATMENT OF AUTISM SPECTRUM
6 DISORDERS FOR A CHILD PURSUANT TO THIS SUBSECTION (1.4). FOR A
7 CHILD FROM BIRTH THROUGH EIGHT YEARS OF AGE UP TO, BUT NOT
8 INCLUDING, NINE YEARS OF AGE, THE ANNUAL MAXIMUM BENEFIT FOR
9 APPLIED BEHAVIOR ANALYSIS FOR AUTISM SPECTRUM DISORDERS
10 REQUIRED BY THIS SUBSECTION (1.4) SHALL BE IN AN AMOUNT NOT TO
11 EXCEED THIRTY-FOUR THOUSAND DOLLARS AND FOR A CHILD NINE YEARS
12 OF AGE OR OLDER AND UNDER NINETEEN YEARS OF AGE, THE ANNUAL
13 MAXIMUM BENEFIT FOR APPLIED BEHAVIOR ANALYSIS FOR AUTISM
14 SPECTRUM DISORDERS REQUIRED BY THIS SUBSECTION (1.4) SHALL BE IN
15 AN AMOUNT NOT TO EXCEED TWELVE THOUSAND DOLLARS.

16 (II) NOTHING IN THIS SUBSECTION (1.4) SHALL BE CONSTRUED TO:

17 (A) REQUIRE OR PERMIT A CARRIER TO REDUCE BENEFITS
18 PROVIDED FOR AUTISM SPECTRUM DISORDERS IF A HEALTH BENEFIT PLAN
19 ALREADY PROVIDES COVERAGE THAT EXCEEDS THE REQUIREMENTS OF
20 THIS SUBSECTION (1.4);

21 (B) PREVENT A CARRIER FROM INCREASING BENEFITS PROVIDED
22 FOR AUTISM SPECTRUM DISORDERS; OR

23 (C) LIMIT COVERAGE FOR PHYSICAL OR MENTAL HEALTH BENEFITS
24 COVERED UNDER A HEALTH BENEFIT PLAN.

25 (c) TREATMENT FOR AUTISM SPECTRUM DISORDERS SHALL BE
26 PRESCRIBED OR ORDERED BY A LICENSED PHYSICIAN OR LICENSED
27 PSYCHOLOGIST.

1 (d) A HEALTH BENEFIT PLAN OFFERED TO RESIDENTS OF THIS STATE
2 PROVIDING BASIC HEALTH CARE SERVICES THAT IS DELIVERED, ISSUED FOR
3 DELIVERY, OR RENEWED IN THIS STATE SHALL NOT EXCLUDE AUTISM
4 SPECTRUM DISORDERS OR IMPOSE ADDITIONAL REQUIREMENTS FOR
5 AUTHORIZATION OF SERVICES THAT OPERATE TO EXCLUDE COVERAGE FOR
6 THE ASSESSMENT, DIAGNOSIS, AND TREATMENT OF AUTISM SPECTRUM
7 DISORDERS.

8 (e) EXCEPT AS OTHERWISE PROVIDED IN PARAGRAPH (b) OF THIS
9 SUBSECTION (1.4), THE COVERAGE REQUIRED UNDER THIS SUBSECTION
10 (1.4) SHALL NOT BE SUBJECT TO DOLLAR LIMITS, DEDUCTIBLES, OR
11 COINSURANCE PROVISIONS THAT ARE LESS FAVORABLE TO AN INSURED
12 THAN THE DOLLAR LIMITS, DEDUCTIBLES, OR COINSURANCE PROVISIONS
13 THAT APPLY TO PHYSICAL ILLNESS GENERALLY UNDER THE HEALTH
14 BENEFIT PLAN. THE BENEFITS OF THIS SUBSECTION (1.4) SHALL BE IN
15 ADDITION TO ANY BENEFITS PROVIDED FOR IN SUBSECTION (1.3) AND (1.7)
16 OF THIS SECTION.

17 (f) BENEFITS PROVIDED BY A CARRIER ON BEHALF OF A COVERED
18 INDIVIDUAL FOR ANY CARE, TREATMENT, INTERVENTION, SERVICE, OR
19 ITEM, THE PROVISION OF WHICH WAS FOR THE TREATMENT OF A HEALTH
20 CONDITION NOT DIAGNOSED AS AN AUTISM SPECTRUM DISORDER, SHALL
21 NOT BE APPLIED TOWARD ANY MAXIMUM BENEFIT AMOUNT ESTABLISHED
22 UNDER THIS SUBSECTION (1.4).

23 (g) A CARRIER MAY NOT DENY OR REFUSE TO PROVIDE OTHERWISE
24 COVERED SERVICES, REFUSE TO ISSUE, RENEW, OR REISSUE, OR OTHERWISE
25 RESTRICT OR TERMINATE COVERAGE UNDER A HEALTH BENEFIT PLAN
26 BECAUSE THE INDIVIDUAL OR HIS OR HER COVERED DEPENDENT IS
27 DIAGNOSED WITH AN AUTISM SPECTRUM DISORDER OR DUE TO THE

1 INDIVIDUAL'S OR DEPENDENT'S UTILIZATION OF SERVICES FOR WHICH
2 BENEFITS ARE MANDATED BY THIS SUBSECTION (1.4).

3 (h) ANY REVIEW OF A TREATMENT PLAN OR ANY APPEAL OF
4 A DECISION REGARDING TREATMENT SHALL BE SUBJECT TO THE RULES OF
5 THE COMMISSIONER ON PROMPT INVESTIGATION OF HEALTH PLAN CLAIMS
6 INVOLVING UTILIZATION REVIEW AND DENIAL OF BENEFITS.

7 (i) NOTHING IN THIS SUBSECTION (1.4) SHALL BE CONSTRUED AS
8 AFFECTING ANY OBLIGATION TO PROVIDE SERVICES TO AN INDIVIDUAL
9 UNDER AN INDIVIDUALIZED FAMILY SERVICE PLAN, AN INDIVIDUALIZED
10 EDUCATION PROGRAM, OR AN INDIVIDUALIZED PLAN. THE SERVICES
11 REQUIRED TO BE COVERED BY THIS SUBSECTION (1.4) SHALL BE IN
12 ADDITION TO ANY SERVICES PROVIDED TO AN INDIVIDUAL UNDER AN
13 INDIVIDUALIZED FAMILY SERVICE PLAN, AN INDIVIDUALIZED EDUCATION
14 PROGRAM, OR AN INDIVIDUALIZED PLAN.

15 (j) COVERAGE UNDER THIS SUBSECTION (1.4) IS SUBJECT TO ALL
16 TERMS, CONDITIONS, DEFINITIONS, RESTRICTIONS, EXCLUSIONS,
17 LIMITATIONS, AND UTILIZATION REVIEW OF HEALTH CARE SERVICES THAT
18 APPLY TO ANY OTHER COVERAGE UNDER THE HEALTH BENEFIT PLAN,
19 INCLUDING THE TREATMENT UNDER THE HEALTH BENEFIT PLAN OF
20 SERVICES PERFORMED BY PARTICIPATING AND NONPARTICIPATING
21 PROVIDERS.

22 **SECTION 4. 10-16-104.5, Colorado Revised Statutes, is**
23 **amended to read:**

24 **10-16-104.5. Autism - treatment - not mental illness. (1) Any**
25 **sickness and accident insurance policy providing indemnity for disability**
26 **due to sickness issued by an entity subject to the provisions of part 2 of**
27 **this article and any individual or group service or indemnity contracts**

1 POLICIES issued by an entity subject to the provisions of part 3 or 4 of this
2 article which provide coverage for autism shall provide such coverage in
3 the same manner as for any other accident or sickness, other than mental
4 illness, otherwise covered under such policy.

5 (2) Nothing in this section shall mandate or be construed or
6 interpreted to mandate that any INDIVIDUAL policy hospital service or
7 indemnity contract, or evidence of coverage must provide coverage for
8 autism.

9 (3) NOTHING IN THIS SECTION SHALL PROHIBIT OR PREVENT A
10 PERSON WITH AN AUTISM SPECTRUM DISORDER FROM RECEIVING MENTAL
11 HEALTH BENEFITS IN HIS OR HER HEALTH BENEFIT PLAN.

12 [REDACTED]
13 [REDACTED]

14 **SECTION 5.** 25.5-8-107 (1) (a), Colorado Revised Statutes, is
15 amended BY THE ADDITION OF A NEW SUBPARAGRAPH, to read:

16 **25.5-8-107. Duties of the department - schedule of services -**
17 **premiums - copayments - subsidies.** (1) In addition to any other duties
18 pursuant to this article, the department shall have the following duties:

19 (a) (IV) THE SCHEDULE OF HEALTH CARE SERVICES INCLUDED IN
20 THE PLAN SHALL NOT INCLUDE COVERAGE PURSUANT TO THE MANDATORY
21 COVERAGE PROVISIONS OF SECTION 10-16-104 (1.4), C.R.S.

22 **SECTION 6. Act subject to petition - effective date -**
23 **applicability.** (1) This act shall take effect July 1, 2010.

24 (2) However, if a referendum petition is filed against this act or
25 an item, section, or part of this act during the ninety-day period after final
26 adjournment of the general assembly that is allowed for submitting a
27 referendum petition pursuant to article V, section 1 (3) of the state

1 constitution, then the act, item, section, or part, shall not take effect unless
2 approved by the people at a biennial regular general election and shall
3 take effect on the date specified in subsection (1) or on the date of the
4 official declaration of the vote thereon by proclamation of the governor,
5 whichever is later.

6 (3) The provisions of this act shall apply to health insurance
7 policies, health care service or indemnity contracts, or managed care
8 plans issued or renewed on or after the applicable effective date of this
9 act.