



Lutheran Advocacy Ministry-Colorado
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Health Care Legislation - 2011

Exempt School-Based Clinics from Co-Pay Requirements –House Bill 1019 (support)

Status: Passed House & Senate; Signed by Governor Hickenlooper on March 17th

Under certain circumstances, it is a crime (abuse of health insurance) to knowingly waive a patient's required deductible or copayment and then seek payment from a third-party payer. The bill exempts healthcare services provided by school-based health centers from the crime.

Repeal Hospital Provider Fee – House Bill 1025 (oppose)

Status: Failed in House Committee on Health & Environment

The bill repeals the "Health Care Affordability Act of 2009" that established hospital provider fees for services provided by hospitals. Hospitals have consistently supported this fee, since it draws matching funding from the federal government, which helps cover the cost of services they provide to uninsured Coloradans (i.e. extending coverage to additional children through the Children's Health Plan).

Align Children's Medicaid Eligibility - Senate Bill 008 (support)

Status: Passed Senate & House; signed by Governor Hickenlooper on April 8th

Currently, families earning between 100% and 133% of the federal poverty level can have kids on two different state health insurance programs, causing confusion, inefficiency and unnecessary costs. Children under six-years old are covered by the Medicaid program, and older children are covered by the Children's Health Plan. The plans provide different benefits, have different enrollment cycles, and can include different healthcare providers. This bill would align eligibility in the two programs.



Colorado Council
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Alternative Medicaid Program for the Elderly – Senate Bill 006 (oppose)

Status: Failed in Senate Committee on Health & Human Services

The bill creates a voluntary, alternative state Medicaid program for the elderly, if federally approved. An eligible participant agrees to receive a lower rate of coverage, equal to 70% of the medical assistance that would be provided through the traditional Medicaid program. In exchange, the participant can choose any provider, and the state waives the right to pursue estate recovery from their family when the participant dies. The participant could return to the traditional program after thirty days written notice

Health Care Benefit Exchange – Senate Bill 200 (support)

Status: Passed Senate & House; signed by Governor Hickenlooper on June 1st

This bill creates a state health-benefit exchange as a nonprofit unincorporated public entity. The exchange will be governed by a nine-member board of directors to be appointed by the Governor and legislative leaders. It establishes a legislative oversight committee responsible for reviewing grant applications and financial & operational plans. It requires a five-year review and establishes criteria for that review process.

New Monthly Fee in Children’s Health Program – Senate Bill 213 (oppose)

Status: Passed Senate & House; vetoed by Governor Hickenlooper on May 31st

Families currently pay an annual enrollment fee to participate in the state’s Children’s Health Plan. This bill would substitute a monthly fee for families with incomes between 205% and 250% of the federal poverty level (\$20 per month for the first child and \$10 per month for each additional child, up to a maximum of \$50 per month per family). It is estimated that this increase would cause nearly 20% of those families to drop out of the program.

Pregnant Women & Medicaid Eligibility – Senate Bill 250 (support)

Status: Passed Senate & House; signed by Governor Hickenlooper on May 27th

This bill increases the upper income limit for Medicaid eligibility among pregnant women from the current level of 133 percent to 185 percent of federal poverty level (FPL) in order to comply with federal law.

For Questions or more information about these bills, please contact:

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