

HOUSE COMMITTEE OF REFERENCE REPORT

Chair of Committee

May 5, 2026
Date

Committee on Health & Human Services.

After consideration on the merits, the Committee recommends the following:

SB26-138 be amended as follows, and as so amended, be referred to the Committee of the Whole with favorable recommendation:

1 Amend reengrossed bill, page 11, line 10, strike "MEDICAL ASSISTANCE"
2 and substitute "PRESUMPTIVE ELIGIBILITY".

3 Page 12, line 7, before "If" insert "(I)".

4 Page 12, after line 11 insert:

5 "(II) UPON NOTIFICATION OF A DETERMINATION THAT A PATIENT
6 IS INELIGIBLE FOR PUBLIC HEALTH-CARE COVERAGE PURSUANT TO
7 SUBSECTION (3.5)(d) OF THIS SECTION, A HEALTH-CARE FACILITY SHALL
8 PROCEED WITH A DETERMINATION OF WHETHER THE PATIENT IS A
9 QUALIFIED PATIENT."

10 Page 12, after line 20 insert:

11 "(d) IF A PATIENT IS DETERMINED ELIGIBLE FOR PUBLIC
12 HEALTH-CARE COVERAGE PURSUANT TO SUBSECTION (3.5)(d) OF THIS
13 SECTION, REIMBURSEMENT THROUGH PUBLIC HEALTH-CARE COVERAGE IS
14 THE PRIMARY REIMBURSEMENT BEFORE ANY DISCOUNTS ARE PROVIDED
15 PURSUANT TO THIS SECTION.

16 (e) WHERE A HEALTH-CARE FACILITY DETERMINES, BASED ON
17 AVAILABLE INFORMATION, THAT A PATIENT IS FACIALLY INELIGIBLE FOR
18 PUBLIC HEALTH-CARE COVERAGE, THE HEALTH-CARE FACILITY MAY
19 PROCEED DIRECTLY WITH A DETERMINATION OF WHETHER THE PATIENT IS
20 A QUALIFIED PATIENT."

21 Reletter succeeding paragraph accordingly.

1 Page 15, line 3, strike "MEDICAL ASSISTANCE" and substitute
2 "PRESUMPTIVE ELIGIBILITY".

3 Page 18, line 16, after "SCREENING" insert "OR APPLICATION".

4 Page 18, line 17, strike "25.5-3-502," and substitute "25.5-3-502 OR
5 25.5-3-502.5,".

6 Page 19, line 7, strike "REQUIRED PURSUANT TO SECTION 25.5-3-502," and
7 substitute "OR APPLICATION REQUIRED PURSUANT TO SECTION 25.5-3-502
8 OR 25.5-3-502.5,".

9 Page 21, after line 13 insert:

10 **"SECTION 13.** In Colorado Revised Statutes, 6-20-201, **amend**
11 the introductory portion and (1) as follows:

12 **6-20-201. Definitions.**

13 ~~For the purposes of~~ AS USED IN this part 2, unless the context
14 otherwise requires:

15 (1) "Collection activity" means only those activities provided or
16 performed by a licensed collection agency, using a business name other
17 than the name of the health-care provider, for purposes of collecting a
18 MEDICAL debt. The term does not include any standard billing procedures
19 used by the health-care provider or its agent in the normal course of
20 business on current, nondelinquent accounts."

21 Renumber succeeding sections accordingly.

22 Page 24, line 24, strike "16" and substitute "17".

23 Page 25, line 8, strike "16" and substitute "17".

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