



# Colorado Society of Addiction Medicine

*A Chapter of American Society of Addiction Medicine*

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January 29, 2025

The Honorable Kyle Brown  
Chair  
House Committee on Health and Human Services  
Colorado General Assembly  
200 E Colfax Avenue, HCR 0112  
Denver, CO 80203

**Re: COSAM's Support for HB 25-1002, Medical Necessity Determination Insurance Coverage**

Dear Chair Brown,

On behalf of the Colorado Society of Addiction Medicine (COSAM), the medical specialty society representing physicians and clinicians in Colorado specializing in the treatment of addiction, we write today in strong support of HB 25-1002. This important legislation would ensure that mental health and substance use disorder (SUD) parity requirements are strengthened and medical necessity determinations are made according to non-profit clinical specialty association standards.

In 2008, the Mental Health Parity and Addiction Equity Act (MHPAEA) was enacted into federal law.<sup>1</sup> The law aims to ensure that behavioral health conditions, like SUD, are covered at parity with physical health conditions. In the years since its enactment, considerable progress has been made. However, the promise of fully guaranteeing parity for behavioral health conditions has yet to be fully realized. Indeed, much of the responsibility of fully enforcing the core tenets of MHPAEA falls to state governments and insurance departments.<sup>2</sup>

Simply put, HB 25-1002 is essential legislation to clearly define the components of parity in our state and empower state agencies with enhanced tools to oversee payers. Crucially, this legislation requires that medical necessity determinations are made in accordance with criteria and guidelines from non-profit clinical specialty association standards. This provision will help to ensure that payers align with the core tenets of MHPAEA. Further, HB 25-1002 requires that utilization reviews are conducted in

alignment with these standards for medically necessary care in behavioral health, rather than non-transparent criteria. If enacted, this provision will reduce treatment disruptions and delays encountered by patients and providers on account of these utilization reviews. In the SUD treatment space, disruptions and delays for medically necessary treatment can cost an individual their life.

COSAM is proud to support HB 25-1002 which would further enhance behavioral health parity protections in our state. We especially commend the group of bipartisan cosponsors behind this legislation. Further, we urge all members of the committee to support advancing HB 25-1002 for a full floor vote.

Please do not hesitate to contact me if you have any questions or concerns. Thank you for your consideration.

Sincerely,

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CC:

The Honorable Sheila Lieder  
The Honorable Mary Bradfield  
The Honorable Brandi Bradley  
The Honorable Regina English  
The Honorable Lisa Feret  
The Honorable Lori Garcia Sander  
The Honorable Lindsay Gilchrist  
The Honorable Eliza Hamrick  
The Honorable Dusty Johnson  
The Honorable Karen McCormick  
The Honorable Gretchen Rydin  
The Honorable Katie Stewart

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<sup>1</sup> Centers for Medicare & Medicaid Services. (2024). *The Mental Health Parity and Addiction Equity Act (MHPAEA)*. CMS.gov. <https://www.cms.gov/marketplace/private-health-insurance/mental-health-parity-addiction-equity>

<sup>2</sup> Volk, J., Walsh-Aker, E., & Goe, C. L. (2024). *Enforcing mental health parity: State options to Improve Access* | Commonwealth Fund. <https://www.commonwealthfund.org/publications/issue-briefs/enforcing-mental-health-parity-state-options-improve-access-care>