BEFORE THE COMMISSIONER OF INSURANCE

STATE OF COLORADO

**IN THE MATTER OF PREMIUM RATE REDUCTION FOR STANDARDIZED SMALL GROUP MARKET HEALTH PLAN YEAR 2026 OF:**

Rocky Mountain Hospital & Medical Services, Inc.

Carrier;

And Concerning:

San Luis Valley Regional Medical Center,

Hospital,

Kathryn Goldberg,

Office of the Insurance Ombudsman for Colorado Option Plans,

And the Division of Insurance.

**[PROPOSED] FINAL AGENCY ORDER**

This matter concerns the Carrier’s premium rate reductions required for Plan Year 2026 under the Colorado Standardized Health Benefit Plan Act, § 10-16-1301, et seq., C.R.S. The Act governs the standardized health benefit plan (Colorado Option) to cover essential health benefits, improve racial health equity and decrease racial health disparities, and achieve premium rate reductions to ensure that health insurance is affordable for Colorado consumers. §§ 10-16-1304(1)(d)(III), 10-16-1305(2)(d), C.R.S. Upon Request for Final Agency Order and related Notice filed by the Division of Insurance on May \_\_\_\_ 2025, the Commissioner of Insurance finds and orders as follows:

1. On or about March 3, 2025, Carrier Rocky Mountain Hospital & Medical Services, Inc. (“Anthem”) notified the Commissioner that it would be unable to meet the premium rate reduction required for plan year 2026 in Anthem’s Small Group Pathway Standard Network (Network CON006), as required by section 10-16-1306(2), C.R.S. San Luis Valley Regional Medical Center (“San Luis Valley”) is a Material Provider which, at the time of Anthem’s notice, had reimbursement rates with Anthem that exceeded the reimbursement rates set forth in statute. *See* § 10-16-1306(5), C.R.S.; Regulation 4-2-92, Section 4(T).
2. As recited by the Division, and pursuant to Colorado Insurance Regulation 4-2-92, Section 12.C., settlement negotiations between Anthem and San Luis Valley resulted in San Luis Valley reducing reimbursements rates under section 10-16-1306, C.R.S. The reduced reimbursement rates were submitted to the Division on April 25, 2025, via a joint written notification from Anthem and San Luis Valley (“April 25, 2025 Anthem-San Luis Valley Notification”) confirming the Parties reduced San Luis Valley’s plan year 2026 reimbursement rate for Anthem’s Small Group Pathway Standard Network (Network CON006). Anthem has produced to the Division the necessary documentation set forth in Section 12.D. of Colorado Insurance Regulation 4-2-92, and the Division has verified the premium impacts based on the documentation submitted to the Division by Anthem.[[1]](#footnote-2)
3. The Division now seeks approval of those terms. *See* § 10-16-1306(4)(a), C.R.S.; Regulation 4-2-92, Sections 12, 23.
4. The Commissioner has jurisdiction over this matter and has the duty to approve or disapprove reimbursement rate settlements for Colorado Option Standardized Plans. §§ 10-1-108, 10-16-1306(3)(a), C.R.S.; Colorado Insurance Regulation 4-2-92, Section 12(A).
5. In lieu of a complaint and adjudication under section 10-16-1306, C.R.S., the Commissioner thus approves the reimbursement rate of Anthem and San Luis Valley for Anthem’s Small Group Pathway Standard Network (Network CON006).
6. The Commissioner further orders, under section 10-16-1306(4), C.R.S., San Luis Valley to accept the reimbursement rate for PY2026 per the settlement terms between Anthem and San Luis Valley and as stated in the April 25, 2025 Anthem-San Luis Valley Notification.
7. It is further ordered that Anthem shall not reimburse San Luis Valley for its Colorado Option Standardized Plans in Anthem’s Small Group Pathway Standard Network (Network CON006) at a rate other than the rate as represented to the Division in the April 25, 2025 Anthem-San Luis Valley Notification.
8. No hearing is required, and the hearing presently scheduled for July 9th and 10th, 2025 is hereby vacated, and this matter is concluded.

DONE and ORDERED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_, 2025.

/s/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MICHAEL CONWAY

COMMISSIONER OF INSURANCE

**CERTIFICATE OF SERVICE**

This is to certify that I have duly served this **FINAL AGENCY ORDER** by electronic mail on this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_ 2025, addressed as follows:

*For Carrier:*

Jessica Belle, Associate General Counsel

[Jessica.belle@elevancehealth.com](mailto:Jessica.belle@elevancehealth.com)

*For Hospital:*

San Luis Valley

T. Jeffrey Fitzgerald, Shareholder

Polsinelli PC

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*Office of the Insurance Ombudsman* *for Colorado Option Plans:*

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*Courtesy copy to Adjudicatory Counsel*

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s/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. The carrier’s premium rate filing, including the reported premium impact, is further subject to review and requirements under § 10-16-107, C.R.S. [↑](#footnote-ref-2)