



# Frequently Asked Questions (FAQs) on Colorado Option Culturally Responsive Provider Network Reporting and Training Requirements for Providers

Updated 2/25/2025

Below are Frequently Asked Questions regarding the culturally responsive provider network reporting requirements included in [Colorado Insurance Regulation 4-2-80](#).

## Overview

### 1. Why am I receiving messages from an insurance carrier to complete training or report on demographic data?

Established through [HB21-1232](#), the Colorado Option is designed to promote health equity and reduce health disparities. The Colorado Option plans offered by insurance carriers (“carriers”) must have a network that is “culturally responsive and, to the greatest extent possible, reflects the diversity of its enrollees in terms of race, ethnicity, gender identity, and sexual orientation in the area that the network exists.” Through a series of stakeholder meetings, the Division of Insurance developed the reporting and training requirements in Colorado Insurance Regulation 4-2-80 to comply with the culturally responsive provider network requirements in HB21-1232. Materials from those stakeholder meetings can be found on the Division’s website [here](#). Training and demographic data reporting are key tools that help ensure the Colorado Option is working as intended.

### 2. Which providers do these reporting requirements apply to?

As defined in § 10-16-102(56), Colorado Revised Statutes (C.R.S.), provider means “any physician, dentist, optometrist, anesthesiologist, hospital, X ray, laboratory and ambulance service, or other person who is licensed or otherwise authorized in this state to furnish health-care services.”

## Provider Demographic Data

### 3. Are providers required to report on demographic data?

No. This reporting requirement falls on the carriers offering Colorado Option Plans and this data is voluntary for providers to report. Per Colorado Insurance Regulation 4-2-80, this demographic data will only be reported to the Colorado Division of Insurance in the aggregate, and personally identifiable information shall be kept



confidential by the carrier and will not be disclosed without the written consent of the reporting provider or office staff member.

Data submitted to the carriers will be used to improve health equity, reduce health disparities for covered persons who experience higher rates of health disparities and inequities, and provide aggregate information about the demographic diversity of the providers in the carrier's network. The availability of provider demographic data is important for enrollees's ability to obtain timely, high-quality, language-accessible, and culturally-competent care. Studies have found that enrollees who don't receive culturally competent care may have lower satisfaction with health care, have negative health consequences, and may receive poor quality care.<sup>1</sup> On the other hand, enrollees who do receive culturally competent care see better health outcomes.<sup>2</sup>

### **Anti-Bias and Cultural Competency Training Requirements**

#### **4. Are providers required to complete anti-bias and cultural competency training?**

For Colorado Option plan network providers and providers' front office staff, carriers are required to create a process for network providers and their staff to annually report on any anti-bias, cultural competency, or similar training that has been completed over the last year. Carriers are also required to ask, collect, and report on the trainings that have been completed by network providers and front office staff. It is the Division's expectation that carriers will create a process that encourages providers and front office staff to regularly complete trainings that are designed to assist covered persons who experience higher rates of health disparities and inequities. When a carrier asks whether the provider and their front office staff completed the training, they will likely ask for the name or subject of the training, a description, and the length of the training(s) completed.

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<sup>1</sup> Georgetown University Health Policy Institute, "Cultural Competence in Health Care: Is it important for people with chronic conditions," available at: <https://hpi.georgetown.edu/cultural/>; National Library of Medicine, "Implicit Racial/Ethnic Bias Among Health Care Professionals and Its Influence on Health Care Outcomes: A Systematic Review," available at: <https://pubmed.ncbi.nlm.nih.gov/26469668/>

<sup>2</sup> Urban Institute, "Racially Minoritized Patients Can Benefit from Racially Concordant Providers but Struggle to Find Them," available at: [https://www.urban.org/sites/default/files/2025-02/Racially\\_Minoritized\\_Patients\\_and\\_Provider\\_Concordance.pdf](https://www.urban.org/sites/default/files/2025-02/Racially_Minoritized_Patients_and_Provider_Concordance.pdf); National Library of Medicine, "Reducing Disparities through Culturally Competent Health Care: An Analysis of the Business Case," available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC5094358/>; The Commonwealth Fund, "The Role and Relationship of Cultural Competence and Patient-Centeredness in Health Care Quality," available at: <https://www.commonwealthfund.org/publications/fund-reports/2006/oct/role-and-relationship-cultural-competence-and-patient>; Clinics in Integrated Care, "Culturally competent healthcare," available at: <https://doi.org/10.1016/j.intcar.2022.100130>; American Journal of Public Health, "Role of Doula's in Improving Maternal Health and Health Equity Among Medicaid Enrollees, 2014–2023," available at: <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2024.307805?role=tab>



**5. Do providers need to complete any specific training(s) to comply with this requirement?**

No. The provider(s) and their front office staff can complete any anti-bias, cultural competency, or similar training. The insurance carrier may provide the office with available or recommended training options or the provider can find another form of training that would satisfy these requirements (including developing their own training). For example, [My Diverse Patients](#), [the Georgetown University National Center for Cultural Competence](#), and the U.S. Department of Health and Human Services' Office of Minority Health [Think Cultural Health](#) program provide some resources that could count toward this training requirement.

Under the Health Care Provider Training Grant Program established under [HB22-1267](#), the Colorado Department of Public Health and Environment (CDPHE) awarded funding to nine organizations to conduct training for providers on delivering culturally responsive and affirming care. Those organizations can be found on the [CDPHE website](#). Trainings and resources from these organizations can be found below:

- [Castillo Primary Care](#)
- [HealthTeamWorks](#)
- [The Gyedi Project](#)
- [I Am Well Foundation](#)
- [Immunize Colorado](#)
- [Southwestern Colorado Area Health Education Center](#)
- [Youth Seen](#)
- [Envision: You](#)