



Fiscal Note

Legislative Council Staff

Nonpartisan Services for Colorado’s Legislature

SB 25-045: HEALTH-CARE PAYMENT SYSTEM ANALYSIS

Prime Sponsors:

Sen. Marchman
Rep. McCormick; Boesenecker

Fiscal Analyst:

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Bill Outcome: Signed into Law

Drafting number: LLS 25-0284

Version: Final Fiscal Note

Date: May 22, 2025

Fiscal note status: The final fiscal note reflects the enacted bill.

Summary Information

Overview. The bill requires the Colorado School of Public Health in the University of Colorado, with assistance from a newly created analysis collaborative, to create a report on model legislation for a universal single-payer health care system.

Types of impacts. The bill is projected to affect the following areas through FY 2026-27:

- State Revenue
- State Expenditures
- TABOR Refunds

Appropriations. No appropriation is required. Gifts, grants, and donations received by the University of Colorado can be spent without an appropriation.

**Table 1
State Fiscal Impacts**

Type of Impact	Budget Year FY 2025-26	Out Year FY 2026-27
State Revenue (Cash Funds)	\$290,735	\$115,367
State Expenditures (Cash Funds)	\$290,735	\$115,367
Transferred Funds	\$0	\$0
Change in TABOR Refunds	\$50,000	\$0
Change in State FTE	0.0 FTE	0.0 FTE

Summary of Legislation

The bill requires the School of Public Health at the University of Colorado (CU) to acquire model legislation developed by a nonprofit to enact a universal single-payer health care system. By December 31, 2026, the school must produce a report on the model legislation that:

- analyzes costs;
- identifies potential revenue sources to cover the costs;
- analyzes connections to federal law;
- evaluated the feasibility of other models; and
- confirms that the legislation will have desired results.

CU may use an actuarial consultant to produce the report.

The bill creates the Statewide Health Care Analysis Collaborative under the Department of Health Care Policy and Financing (HCPF) to assist the university in its report, and requires it to meet at least twice virtually before October 1, 2026. The analysis collaborative consists of representatives from various sectors related to health care, labor, and advocacy. Members of the analysis collaborative serve without compensation, but may be reimbursed for actual and necessary expenses.

The bill's implementation is dependent on receipt of sufficient gifts, grants, and donations.

Assumptions

The bill requires CU to submit an application the All Payers Claim Database Scholarship Grant Program for \$50,000 to access the database operated by HCPF. However, the grant program was defunded in the FY 2025-26 Long Bill and is not authorized to accept donations. The fiscal note assumes that CU will pay HCPF for access to the database.

Any legislators who serve on the analysis collaborative would be eligible for per diem compensation for meetings held outside of the legislative session, paid from the General Fund. Because the bill does not require any legislative members to serve on the analysis collaborative, the fiscal note assumes this funding is not required.

State Revenue

The bill is expected to increase state cash fund revenue to CU by \$290,735 in FY 2025-26 and \$115,367 in FY 2025-26 from gifts, grants, or donations. In total, \$406,102 is required over the two years. This revenue is not subject to TABOR.

In addition, the bill will increase state revenue to HCPF by \$50,000 in FY 2025-26 only. As discussed in the Assumptions section, HCPF will receive revenue from CU to access the All Payers Claim Database. This revenue is subject to TABOR.

State Expenditures

The bill increases state expenditures by \$290,735 in FY 2025-26 and \$115,367 in FY 2026-27 only. These costs will be incurred by the School of Public Health at CU, paid by gifts, grants, and donations. The bill also increases workload in HCPF. These impacts are shown in Table 2 and discussed below.

University of Colorado

The bill increases expenditures in CU to produce the report on the model legislation. If CU receives gifts, grants, and donations in excess of these amounts, the university will spend the funds on additional staff and actuary support for the project.

Table 2
Institution of Higher Education Expenditures
University of Colorado

Cost Component	Budget Year FY 2025-26	Out Year FY 2026-27
Researcher Compensation	\$164,762	\$82,381
Research Assistant Compensation	\$65,973	\$32,986
Database Access	\$50,000	\$0
Actuarial Analysis Contract	\$10,000	\$0
Total Costs	\$290,735	\$115,367

Researcher Compensation

Researchers at the university will produce the report between July 2025 and December 2026. It is assumed that the equivalent of 0.4 FTE will work the entire time, though that work is expected to be spread across 5 distinct employees. Costs are based off of those employees' current salaries.

Research Assistant Compensation

One research assistant the equivalent of 0.9 FTE will support the research between July 2025 and December 2026.

Actuarial Analysis Contract

The university will contract with an actuary at \$400 per hour for 25 hours.

Database Access

CU is expected to seek access to the All Payer Health Claims Database at a cost of \$50,000, which will be paid to HCPF.

Department of Health Care Policy and Financing

Workload will increase in HCPF to facilitate access to the database and to assist the analysis collaborative. Since CU is expected to pay for database access and the meetings are virtual, no appropriation is required.

TABOR Refunds

The bill is expected to increase the amount of state revenue required to be refunded to taxpayers by the amounts shown in Table 1 above. This estimate assumes the March 2025 LCS revenue forecast. Because TABOR refunds are paid from the General Fund, increased cash fund revenue will reduce the amount of General Fund available to spend or save.

Effective Date

This bill was signed into law by the Governor and took effect on May 14, 2025.

State and Local Government Contacts

Health Care Policy and Financing
Higher Education

Legislative Council Staff