

FIRST REGULAR SESSION

HOUSE BILL NO. 612

92ND GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES PARKER, DEEKEN AND KINGERY (Co-sponsors).

Read 1st time March 5, 2003, and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

2060L.011

AN ACT

To repeal sections 376.1219, RSMo, and to enact in lieu thereof one new section relating to health insurance coverage for treatment of inherited diseases of amino and organic acids.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 376.1219, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 376.1219, to read as follows:

376.1219. 1. Each policy issued by an entity offering individual and group health insurance which provides coverage on an expense-incurred basis, individual and group health service or indemnity type contracts issued by a nonprofit corporation, individual and group service contracts issued by a health maintenance organization, all self-insured group health arrangements to the extent not preempted by federal law, and all health care plans provided by managed health care delivery entities of any type or description, that are delivered, issued for delivery, continued or renewed in this state on or after September 1, [1997] **2003**, shall provide coverage for formula and low protein modified food products recommended by a physician for the treatment of a patient with phenylketonuria or any inherited disease of amino and organic acids who is covered under the policy, contract, or plan [and who is less than six years of age].

2. For purposes of this section, "low protein modified food products" means foods that are specifically formulated to have less than one gram of protein per serving and are intended to be used under the direction of a physician for the dietary treatment of any inherited metabolic disease. Low protein modified food products do not include foods that are naturally low in protein.

3. The coverage required by this section [may] **shall not** be subject to [the same] **any**

EXPLANATION — Matter enclosed in bold faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law. Matter in boldface type in the above law is proposed language.

17 **greater** deductible [for] **or copayment than other** similar health care services provided by the
18 policy, contract, or plan [as well as a reasonable coinsurance or co-payment on the part of the
19 insured, which shall not be greater than fifty percent of the cost of the formula and food products,
20 and may be subject to], **but may be subject to** an annual benefit maximum of not less than five
21 thousand dollars per covered child. Nothing in this section shall prohibit a carrier from using
22 individual case management or from contracting with vendors of the formula and food products.

23 4. This section shall not apply to a supplemental insurance policy, including a life care
24 contract, accident-only policy, specified disease policy, hospital policy providing a fixed daily
25 benefit only, Medicare supplement policy, long-term care policy, or any other supplemental
26 policy [as determined by the director of the department of insurance].