COMMITTEE ON LEGISLATIVE RESEARCH OVERSIGHT DIVISION

FISCAL NOTE

<u>L.R. No.</u>: 3701-02

Bill No.: HCS for HB 1327

<u>Subject</u>: Insurance - Medical; Insurance Dept.; Physicians

Type: Original Date: April 7, 2006

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND				
FUND AFFECTED	FY 2007	FY 2008	FY 2009	
General Revenue	(Could exceed \$8,991,335)	(Could exceed \$10,789,603)	(Could exceed \$10,789,603)	
Total Estimated Net Effect on General Revenue Fund	(Could exceed \$8,991,335)	(Could exceed \$10,789,603)	(Could exceed \$10,789,603)	

ESTIMATED NET EFFECT ON OTHER STATE FUNDS				
FUND AFFECTED	FY 2007	FY 2008	FY 2009	
All Other	(Could exceed \$1,618,722)	(Could exceed \$1,942,466)	(Could exceed \$1,942,466)	
Total Estimated Net Effect on <u>Other</u> State Funds	(Could exceed \$1,618,722)	(Could exceed \$1,942,466)	(Could exceed \$1,942,466)	

Numbers within parentheses: () indicate costs or losses.

This fiscal note contains 6 pages.

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ESTIMATED NET EFFECT ON FEDERAL FUNDS				
FUND AFFECTED	FY 2007	FY 2008	FY 2009	
Federal	(Could exceed \$2,845,515)	(Could exceed \$3,414,618)	(Could exceed \$3,414,618)	
Total Estimated Net Effect on <u>All</u> Federal Funds	(Could exceed \$2,845,515)	(Could exceed \$3,414,618)	(Could exceed \$3,414,618)	

ESTIMATED NET EFFECT ON LOCAL FUNDS				
FUND AFFECTED	FY 2007	FY 2008	FY 2009	
Local Government	(Up to \$272,000)	(Up to \$326,000)	(Up to \$326,000)	

FISCAL ANALYSIS

ASSUMPTION

Officials from the **Department of Insurance**, **Department of Public Safety (DPS)** - **Director's Office**, and **Missouri Department of Conservation** assume the proposal will have no fiscal impact on their organizations.

Officials from the **DPS** - **Missouri State Highway Patrol** defer to the Missouri Department of Transportation for response regarding the fiscal impact of the proposal on their organization.

Officials from the **Missouri Department of Transportation (DOT)** state the proposal prohibits health insurers from discriminating against any provider who is within the coverage area of the health benefit plan and who is willing to meet the terms and conditions for participation established by the health insurer. This proposal will have no fiscal impact on the Missouri Highway Transportation Commission/DOT. The term "health insurer" is not defined, but is probably not applicable to the Highway and Patrol Medical Plan. Also, the Medical Plan does not establish the terms and conditions for participation by a provider. As a result, this proposal will have no fiscal impact on the Highway and Patrol Medical Plan.

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<u>ASSUMPTION</u> (continued)

Officials from the **Missouri Consolidated Health Care Plan (HCP)** state competition fuels the contract negotiations between providers and a medical plan. This allows health insurers to provide premiums to their enrollees at a lower cost than their competitors. Currently, health insurers contract with a limited number of providers based on a set of criteria. By limiting the number of providers, insurers can reduce overall administrative costs and negotiate lower rates by offering a higher per-provider case load. Many providers give discounts in exchange for patient volume. If every provider participates in a health plan, health insurers cannot guarantee increased patient volume to providers, thereby making it difficult to negotiate lower prices. Providers may refuse to participate if the volume is no longer guaranteed. Then prices will start to escalate. This would result in significant cost to the plans who would recoup these costs through increased premiums. Also, opening networks to all providers may mean a loss of quality checks and cost controls for some health insurers.

Although a little dated, several studies are still being cited by the available literature on this issue and they show a wide range of impacts. One study found that states with an any willing provider law spend approximately 2% more on healthcare than states without such policies. Another study performed by the Barents Group determined the increase between 6.6 and 8.6%. In this response, HCP is calculating the impact of the proposal using a generalized average of 5 percent.

In 2006, the projected health care plan costs are \$392,846,016 for the state members and \$8,160,000 for the Public Entities. Currently, the state contributes approximately 82% towards the state member's premium. The total fiscal impact for the first year could be \$16,106,687 for the state portion and \$326,400 for the Public Entity portion, including the member's portion.

The HCP assumes the term "discriminate" means the plan would not be able to refuse a provider willing to meet its terms and conditions.

Officials from the **Department of Social Services (DOS) - Division of Medical Services (DMS)** state the proposed legislation states that a health insurer shall not discriminate against any provider who is located within the geographic coverage area of the health benefit plan and who is willing to meet the terms and conditions for participation established by the health insurer.

The DMS is affected by this proposal because it administers a managed care program which contracts with health maintenance organizations (HMOs) for the purpose of providing health care services through capitated rates. These HMOs are subject to the regulations in this proposal.

It is estimated there will be a fiscal impact to DMS because of this proposal. The proposal affects the shape of the HMO networks and also reduces the ability of the HMOs to negotiate terms. It is not possible to estimate the amount of the impact at this time. The cost will be

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ASSUMPTION (continued)

incurred during the bidding process and the contract renewals. Capitation payments to managed care plans in FY 05 were over \$822 million. An increase of just one percent in the capitation rate will result in an additional annual cost of \$8.2 million. Therefore, the fiscal impact is unknown greater than \$100,000 annually.

ESTIMATED NET EFFECT ON OTHER STATE FUNDS	(Could exceed \$1.618,722)	(Could exceed \$1,942,466)	(Could exceed \$1,942,466)
Costs - Missouri Consolidated Health Care Plan Increase in State share of health insurance premiums	(Could exceed \$1,618,722)	(Could exceed \$1,942,466)	(Could exceed \$1,942,466)
OTHER STATE FUNDS			
ESTIMATED NET EFFECT ON GENERAL REVENUE FUND	(Unknown exceeding \$8,991,335)	(Unknown exceeding \$10,789,603)	(Unknown exceeding \$10,789,603)
Increase in program costs	(Unknown exceeding \$33,333)	(Unknown exceeding \$40,000)	(Unknown exceeding \$40,000)
<u>Costs - Department of Social Services -</u> Division of Medical Services			
Costs - Missouri Consolidated Health Care Plan Increase in State share of health insurance premiums	(Could exceed \$8,958,002)	(Could exceed \$10,749,603)	(Could exceed \$10,749,603)
GENERAL REVENUE FUND			
FISCAL IMPACT - State Government	FY 2007 (10 Mo.)	FY 2008	FY 2009

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FISCAL IMPACT - State Government	FY 2007 (10 Mo.)	FY 2008	FY 2009
FEDERAL FUNDS	,		
Income - Department of Social Services - Division of Medical Services Reimbursements for increased program payments	Unknown exceeding \$50,000	Unknown exceeding \$60,000	Unknown exceeding \$60,000
Costs - Department of Social Services - Division of Medical Services Increase in capitated program payment rates	(Unknown exceeding \$50,000)	(Unknown exceeding \$60,000)	(Unknown exceeding \$60,000)
Costs - Missouri Consolidated Health Care Plan Increase in health insurance premiums	(Could exceed \$2,845,515)	(Could exceed \$3,414,618)	(Could exceed \$3,414,618)
ESTIMATED NET EFFECT ON FEDERAL FUNDS	(Could exceed \$2,845,515)	(Could exceed \$3,414,618)	(Could exceed \$3,414,618)
FISCAL IMPACT - Local Government	FY 2007 (10 Mo.)	FY 2008	FY 2009
ALL LOCAL GOVERNMENTS			
Costs - All Local Governments Increase in health insurance premiums	(Up to \$272,000)	(Up to \$326,400)	(Up to \$326,400)
ESTIMATED NET EFFECT ON ALL LOCAL GOVERNMENTS	(<u>Up to</u> \$272,000)	(<u>Up to</u> \$326,400)	(<u>Up to</u> \$326,400)

FISCAL IMPACT - Small Business

This proposal could directly impact small business insurance premium costs.

HW-C:LR:OD (12/02)

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DESCRIPTION

This proposal prohibits health insurers, the Missouri Medicaid Program, and the federal Medicare Program from discriminating against any provider located within the geographic coverage area of a health benefit plan who is willing to meet the terms and conditions for participation in the plan.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Missouri Department of Transportation
Department of Social Services
Department of Public Safety Director's Office
 Missouri State Highway Patrol
Missouri Consolidated Health Care Plan
Department of Insurance
Missouri Department of Conservation

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Director April 7, 2006