

## HB 1495 -- Health Insurance Contracts and Plans

Sponsor: Schaaf

This bill changes the laws regarding health insurance contracts and plans.

### CO-PAYMENTS FOR PRESCRIPTION DRUGS (Sections 354.535 and 376.387, RSMo)

When the usual and customary retail price of a prescription drug is less than the co-payment applied by a health maintenance organization or health insurer, the enrollee will only be required to pay the usual and customary retail price of the prescription drug and there will be no further charge to the enrollee or plan sponsor for the prescription. If the price is more than the co-payment, the enrollee will only be required to pay the usual and customary retail price of the prescription drug and there will be no further charge to the enrollee or plan sponsor for the prescription.

### STANDARDIZED INSURANCE APPLICATIONS (Section 374.184)

The Director of the Department of Insurance, Financial Institutions and Professional Registration after consultation with health insurers and a public hearing must establish by rule uniform insurance application forms to be used by all insurers for group health insurance policies, except for group health plans for small employers.

### WILLING PROVIDERS OF HEALTH CARE (Section 376.393)

Health insurers, the MO HealthNet Program, and the federal Medicare Program are prohibited from discriminating against any Missouri health care provider, licensed pharmacy, or licensed home health care agency 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.

### HEALTH INSURANCE CONTRACTS (Section 376.444)

The bill prohibits any agreement between a health insurance carrier and a participating licensed health care provider from containing a provision which:

- (1) Prohibits a provider from contracting with another carrier to accept a lower reimbursement than the payment specified in the agreement;
- (2) Requires the provider to accept a lower reimbursement from

the carrier if the provider agrees with another carrier to accept a lower payment for services;

(3) Terminates or renegotiates the agreement if the provider agrees to accept a lower payment from a different carrier for services; or

(4) Requires the provider to disclose his or her contracted reimbursement rates with other contracted providers.

A violation of any of these provisions will make an agreement void and unenforceable.