#### SECOND REGULAR SESSION

### HOUSE COMMITTEE SUBSTITUTE FOR

# SENATE BILL NO. 508

## 97TH GENERAL ASSEMBLY

4357H.05C D. ADAM CRUMBLISS, Chief Clerk

## **AN ACT**

To repeal sections 43.530, 208.631, 208.636, 208.640, 208.643, 208.646, and 376.2004, RSMo, and to enact in lieu thereof eight new sections relating to health insurance, with a penalty provision.

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

Section A. Sections 43.530, 208.631, 208.636, 208.640, 208.643, 208.646, and

- 376.2004, RSMo, are repealed and eight new sections enacted in lieu thereof, to be known as
- 3 sections 43.530, 208.631, 208.636, 208.640, 208.643, 208.646, 376.998, and 376.2004, to read
- 4 as follows:

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- 43.530. 1. For each request requiring the payment of a fee received by the central repository, the requesting entity shall pay a fee of not more than nine dollars per request for criminal history record information not based on a fingerprint search. In each year beginning on or after January 1, 2010, the superintendent may increase the fee paid by requesting entities by an amount not to exceed one dollar per year, however, under no circumstance shall the fee paid
- 6 by requesting entities exceed fifteen dollars per request.
  - 2. For each request requiring the payment of a fee received by the central repository, the requesting entity shall pay a fee of not more than twenty dollars per request for criminal history record information based on a fingerprint search, unless the request is required under the provisions of subdivision (6) of section 210.481, section 210.487, **subsection 6 of section 376.2004**, or section 571.101, in which case the fee shall be fourteen dollars.
  - 3. A request made under subsections 1 and 2 of this section shall be limited to check and search on one individual. Each request shall be accompanied by a check, warrant, voucher, money order, or electronic payment payable to the state of Missouri-criminal record system or payment shall be made in a manner approved by the highway patrol. The highway patrol may

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

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establish procedures for receiving requests for criminal history record information for classification and search for fingerprints, from courts and other entities, and for the payment of such requests. There is hereby established by the treasurer of the state of Missouri a fund to be entitled as the "Criminal Record System Fund". Notwithstanding the provisions of section 33.080 to the contrary, if the moneys collected and deposited into this fund are not totally expended annually for the purposes set forth in sections 43.500 to 43.543, the unexpended moneys in such fund shall remain in the fund and the balance shall be kept in the fund to accumulate from year to year.

- 208.631. 1. Notwithstanding any other provision of law to the contrary, the MO HealthNet division shall establish a program to pay for health care for uninsured children. Coverage pursuant to sections 208.631 to [208.659] 208.658 is subject to appropriation. The provisions of sections 208.631 to [208.569] **208.658**, health care for uninsured children, shall be void and of no effect if there are no funds of the United States appropriated by Congress to be provided to the state on the basis of a state plan approved by the federal government under the federal Social Security Act. If funds are appropriated by the United States Congress, the department of social services is authorized to manage the state children's health insurance program (SCHIP) allotment in order to ensure that the state receives maximum federal financial participation. Children in households with incomes up to one hundred fifty percent of the federal 10 11 poverty level may meet all Title XIX program guidelines as required by the Centers for Medicare 12 and Medicaid Services. Children in households with incomes of one hundred fifty percent to 13 three hundred percent of the federal poverty level shall continue to be eligible as they were and 14 receive services as they did on June 30, 2007, unless changed by the Missouri general assembly.
  - 2. For the purposes of sections 208.631 to [208.659] **208.658**, "children" are persons up to nineteen years of age. "Uninsured children" are persons up to nineteen years of age who are emancipated and do not have access to affordable employer-subsidized health care insurance or other health care coverage or persons whose parent or guardian have not had access to affordable employer-subsidized health care insurance or other health care coverage for their children [for six months] prior to application, are residents of the state of Missouri, and have parents or guardians who meet the requirements in section 208.636. A child who is eligible for MO HealthNet benefits as authorized in section 208.151 is not uninsured for the purposes of sections 208.631 to [208.659] **208.658**.
  - 208.636. Parents and guardians of uninsured children eligible for the program established in sections 208.631 to [208.657] **208.658** shall:
- 3 (1) Furnish to the department of social services the uninsured child's Social Security 4 number or numbers, if the uninsured child has more than one such number;

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5 (2) Cooperate with the department of social services in identifying and providing 6 information to assist the state in pursuing any third-party insurance carrier who may be liable to 7 pay for health care;

- (3) Cooperate with the department of social services, division of child support enforcement in establishing paternity and in obtaining support payments, including medical support; **and**
- (4) Demonstrate upon request their child's participation in wellness programs including immunizations and a periodic physical examination. This subdivision shall not apply to any child whose parent or legal guardian objects in writing to such wellness programs including immunizations and an annual physical examination because of religious beliefs or medical contraindications[; and
- 16 (5) Demonstrate annually that their total net worth does not exceed two hundred fifty thousand dollars in total valuel.
  - 208.640. 1. Parents and guardians of uninsured children with incomes of more than one hundred fifty but less than three hundred percent of the federal poverty level who do not have access to affordable employer-sponsored health care insurance or other affordable health care coverage may obtain coverage for their children under this section. Health insurance plans that do not cover an eligible child's preexisting condition shall not be considered affordable employer-sponsored health care insurance or other affordable health care coverage. For the purposes of sections 208.631 to [208.659] 208.658, "affordable employer-sponsored health care insurance or other affordable health care coverage" refers to health insurance requiring a monthly premium of:
  - (1) Three percent of one hundred fifty percent of the federal poverty level for a family of three for families with a gross income of more than one hundred fifty and up to one hundred eighty-five percent of the federal poverty level for a family of three;
  - (2) Four percent of one hundred eighty-five percent of the federal poverty level for a family of three for a family with a gross income of more than one hundred eighty-five and up to two hundred twenty-five percent of the federal poverty level;
  - (3) Five percent of two hundred twenty-five percent of the federal poverty level for a family of three for a family with a gross income of more than two hundred twenty-five but less than three hundred percent of the federal poverty level.

20 The parents and guardians of eligible uninsured children pursuant to this section are responsible

- 21 for a monthly premium as required by annual state appropriation; provided that the total
- 22 aggregate cost sharing for a family covered by these sections shall not exceed five percent of
- 23 such family's income for the years involved. No co-payments or other cost sharing is permitted

- 24 with respect to benefits for well-baby and well-child care including age-appropriate
- 25 immunizations. Cost-sharing provisions for their children under sections 208.631 to [208.659]
- 26 **208.658** shall not exceed the limits established by 42 U.S.C. Section 1397cc(e). If a child has
- 27 exceeded the annual coverage limits for all health care services, the child is not considered
- 28 insured and does not have access to affordable health insurance within the meaning of this
- 29 section.
- 2. The department of social services shall study the expansion of a presumptive
- 31 eligibility process for children for medical assistance benefits.
  - 208.643. 1. The department of social services shall implement policies establishing a
  - 2 program to pay for health care for uninsured children by rules promulgated pursuant to chapter
- 3 536, either statewide or in certain geographic areas, subject to obtaining necessary federal
- 4 approval and appropriation authority. The rules may provide for a health care services package
- 5 that includes all medical services covered by section 208.152, except nonemergency
- 6 transportation.
- 7 2. Available income shall be determined by the department of social services by rule,
- 8 which shall comply with federal laws and regulations relating to the state's eligibility to receive
- 9 federal funds to implement the insurance program established in sections 208.631 to [208.657]
- 10 **208.658**.
  - 208.646. There shall be a thirty-day waiting period after enrollment for uninsured
  - 2 children in families with an income of more than two hundred twenty-five percent of the federal
  - 3 poverty level before the child becomes eligible for insurance under the provisions of sections
- 4 208.631 to [208.660] **208.658**. If the parent or guardian with an income of more than two
- 5 hundred twenty-five percent of the federal poverty level fails to meet the co-payment or premium
- 6 requirements, the child shall not be eligible for coverage under sections 208.631 to [208.660]
- 7 **208.658** for [six months] **ninety days** after the department provides notice of such failure to the
- 8 parent or guardian.

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- 376.998. 1. Any health insurance mandate that is applicable to health benefit plans
- written by a health carrier, as both terms are defined in section 376.1350, shall not apply
- 3 to excepted benefit plans, as defined in section 376.450. For purposes of the exemption
- 4 under this section, a "health insurance mandate" means a state requirement for a health
  - carrier to offer or provide coverage for:
    - (1) A treatment by a particular type of health care provider;
- 7 (2) A certain treatment or service, including procedures, medical equipment, or
- 8 drugs that are used in connection with a treatment or service; and
  - (3) Screening, diagnosis, or treatment of a particular disease or condition.

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- 2. All excepted benefit plans issued on or after January 1, 2015, shall include a disclaimer printed in no less than twelve-point font on the front of the policy, certificate, application and enrollment form, and all advertising materials which states: "NOTICE TO CONSUMER: THIS PLAN IS NOT CONSIDERED "MINIMUM ESSENTIAL COVERAGE" AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL INSURANCE. THIS PLAN HAS LIMITS AND EXCLUSIONS AND MAY NOT COVER ALL HEALTH BENEFITS OR SERVICES.".
  - 3. If plan identification cards are issued to enrollees, as defined in section 376.1350, of excepted benefit plans, the cards shall clearly and conspicuously state on the front of the card: "THIS IS NOT MINIMUM ESSENTIAL COVERAGE.".
  - 4. This section applies to all insurers that provide coverage to residents of this state which is issued or renewed on or after January 1, 2015.
  - 376.2004. 1. An individual applying for a navigator license shall make application to the department on a form developed by the director and declare under penalty of refusal, suspension, or revocation of the license that the statements made in the application are true, correct, and complete to the best of the individual's knowledge and belief. Before approving the application, the director shall find that the individual:
  - (1) Is eighteen years of age or older;
    - (2) Resides in this state or maintains his or her principal place of business in the state;
- 8 (3) Is not disqualified for having committed any act that would be grounds for refusal 9 to issue, renew, suspend, or revoke an insurance producer license under section 375.141;
  - (4) Has successfully passed the written examination [prescribed] created and administered by the director. The department may contract with an independent testing service to administer the examination. An individual shall not satisfy the examination requirement by demonstrating achievement of a passing score on any approved certification examination that allows the individual to perform the duties identified in Title 42, U.S.C. Section 18031(i) or related duties, irrespective of whether the examination is for purposes of serving as a navigator, certified application counselor, in-person assister, or health center outreach and enrollment assistance worker in lieu of an examination administered by the department;
  - (5) When applicable, has the written consent of the director under 18 U.S.C. 1033 or any successor statute regulating crimes by or affecting persons engaged in the business of insurance whose activities affect interstate commerce;
    - (6) Has identified the entity with which he or she is affiliated and supervised; and
  - (7) Has paid the fees prescribed by the director.

2. An entity that acts as a navigator, supervises the activities of individual navigators, or receives funding to perform such activities shall obtain a navigator entity license. An entity applying for an entity navigator license shall make application on a form containing the information prescribed by the director.

- 3. The director may require any documents deemed necessary to verify the information contained in an application submitted in accordance with subsections 1 and 2 of this section.
- 4. Entities licensed as navigators shall, in a manner prescribed by the director, provide a list of all individual navigators that are employed by or in any manner affiliated with the navigator entity and shall report any changes in employment or affiliation within twenty days of such change.
- 5. Prior to any exchange becoming operational in this state, the director shall prescribe initial training, continuing education, and written examination standards and requirements for navigators.
- 6. Each applicant for licensure as an individual navigator shall provide two sets of fingerprints to the department for the purpose of completing a criminal background check as a condition of being granted a license to act as a navigator. The department shall use the fingerprints to conduct a Missouri criminal record review of the applicant and a national criminal record review of the applicant with the Federal Bureau of Investigation as defined in section 43.540.
- 7. Any criminal history information received by the department pursuant to the provisions of this section shall be used solely for the internal purposes of the department in determining eligibility for the individual navigator license. The dissemination of criminal history information from the Federal Bureau of Investigation beyond the authorized or related governmental entity is prohibited. All criminal record check information shall be confidential and any person who discloses the information beyond the scope allowed is guilty of a class A misdemeanor.

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