House	Amendment NO
	Offered By
	nte for Senate Substitute for Senate Committee Substitute for on 337.1075, Line 10, by inserting after all of said section and
	is section, the following terms shall mean: y person or entity, including a health carrier, that is engaged in
	for the delivery of [dental] health care services [or the selling
(2) ["Identify", providing in name, address, and telephone number	writing, by email or otherwise, to the participating provider the er, to the extent possible, for any third party to which the to the health care services of the participating provider;
(3) "Network plan", health in which the financing and delivery of	dental services are provided in whole or in part through a sunder contract with the health insurance issuer] "Health care"
service", the same meaning given to	
term "health carrier" shall also include (4) "Participating provider",	de any entity described in subdivision (4) of section 354.700; a provider who, under a contract with a contracting entity, has se services with an expectation of receiving payment, other than
± •	ibles, directly or indirectly from the contracting entity; icensed under section 332.071;
* *	act", a contract between a contracting entity and a provider that ies of the contracting entity and provides for the delivery and
<u>payment of health care services;</u> (7) "Third party", a person o	or entity that enters into a contract with a contracting entity or
	ss to the health care services or contractual discounts of a arty" does not include an employer or other group for whom the rovides administrative services.
2. A contracting entity [shall	l not sell, assign, or otherwise shall only grant a third party articipating provider under a health care contract unless
expressly authorized by the health ca	are contract. The health care contract shall specifically provide
services of the participating provider	te selling, assigning, or giving the contracting entity rights to the r, including network plans] provider's health care services or cordance with a contract between a participating provider and a
contracting entity and only if:	cordance with a contract between a participating provider and a
Action Taken	Date

(1) The contract specifically states that the contracting entity may enter into an agreement with a third party allowing the third party to obtain the contracting entity's rights and responsibilities as if the third party were the contracting entity, and the contract allows the provider to choose not to participate in third-party access at the time the contract is entered into or renewed or when there are material modifications to the contract. The third-party access provision of any provider network contract shall also specifically state that the contract grants third-party access to the provider's health care services and that the provider has the right to choose not to participate in third-party access to the contract or to enter into a contract directly with the third party. A provider's decision not to participate in third-party access shall not permit the contracting entity to cancel or otherwise end a contractual relationship with the provider. When initially contracting with a provider, a contracting entity shall accept a qualified provider even if the provider chooses not to participate in the third-party access provision;

- (2) The third party accessing the contract agrees to comply with all of the contract's terms;
- (3) The contracting entity identifies, in writing or electronic form to the provider, all third parties in existence as of the date the contract is entered into or renewed;
- (4) The contracting entity identifies all third parties in existence in a list on its internet website that is updated at least once every ninety days;
- (5) The contracting entity notifies providers that a new third party is accessing a provider network contract at least thirty days in advance of the relationship taking effect;
- (6) The contracting entity notifies the third party of the termination of a provider network contract no later than thirty days from the termination date with the contracting entity;
- (7) A third party's right to a provider's discounted rate ceases as of the termination date of the provider network contract;
  - (8) The provider is not already a participating provider of the third party; and
- (9) The contracting entity makes available a copy of the provider network contract relied on in the adjudication of a claim to a participating provider within thirty days of a request from the provider.
- 3. [Upon entering a contract with a participating provider and upon request by a participating provider, a contracting entity shall properly identify any third party that has been granted access to the dental services of the participating provider] No provider shall be bound by or required to perform health care services under a provider network contract that has been granted to a third party in violation of the provisions of this section.
- 4. A contracting entity that sells, assigns, or otherwise grants <u>a third party</u> access to [the dental services of] a participating [provider] provider's health care services shall maintain an internet website or a toll-free telephone number through which the participating provider may obtain information which identifies the [insurance carrier] third party to be used to reimburse the participating provider for the covered [dental] health care services.
- 5. A contracting entity that sells, assigns, or otherwise grants <u>a third party</u> access to a participating provider's [dental] <u>health care</u> services shall ensure that an explanation of benefits or remittance advice furnished to the participating provider that delivers [dental] <u>health care</u> services [under the health care contract] for the third party identifies the contractual source of any applicable discount.
- 6. [All third parties that have contracted with a contracting entity to purchase, be assigned, or otherwise be granted access to the participating provider's discounted rate shall comply with the participating provider's contract, including all requirements to encourage access to the participating provider, and pay the participating provider pursuant to the rates of payment and methodology set forth in that contract, unless otherwise agreed to by a participating provider.
- 7. A contracting entity is deemed in compliance with this section when the insured's identification card provides information which identifies the insurance carrier to be used to

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reimburse the participating provider for the covered dental services] (1) The provisions of this section shall not apply if access to a provider network contract is granted to any entity operating in accordance with the same brand licensee program as the contracting entity or to any entity that is an affiliate of the contracting entity. A list of the contracting entity's affiliates shall be made available to a provider on the contracting entity's website.

(2) The provisions of this section shall not apply to a provider network contract for health care services provided to beneficiaries of any state-sponsored health insurance programs including, but not limited to, MO HealthNet and the state children's health insurance program authorized in sections 208.631 to 208.658."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.