House	Amendment NO
AMEND House Committee Substitute for Senate Substitute for Senate Bill No. 181, Page 10, Section 375.1275, Line 46, by inserting after all of said section and line the following:	
(5) "Provider", any person licensed under sec	tion 332.071; etween a contracting entity and a provider that
payment of health care services; (7) "Third party", a person or entity that enterwith another third party to gain access to the health carrier or entracting entity provides administred. A contracting entity [shall not sell, assign, access to [the dental services of] a participating [provexpressly authorized by the health care contract. The that one purpose of the contract is the selling, assigniservices of the participating provider, including network contractual discounts provided in accordance with a contractual discounts provide	rs into a contract with a contracting entity or are services or contractual discounts of a clude an employer or other group for whom the ative services. or otherwise] shall only grant a third party ider under a health care contract unless health care contract shall specifically provide ng, or giving the contracting entity rights to the ork plans] provider's health care services or
contracting entity and only if: (1) The contract specifically states that the cowith a third party allowing the third party to obtain the	

Action Taken____

Date ____

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 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

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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

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