FIRST REGULAR SESSION

HOUSE BILL NO. 100

102ND GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE DAVIDSON.

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12 13 DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal section 376.1060, RSMo, and to enact in lieu thereof one new section relating to the delivery of health care services by dentists.

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

Section A. Section 376.1060, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 376.1060, to read as follows:

376.1060. 1. As used in this section, the following terms shall mean:

- (1) "Contracting entity", any person or entity, **including a health carrier**, that is engaged in the act of contracting with providers for the delivery of [dental] health care services [or the selling or assigning of dental network plans to other health care entities];
- (2) ["Identify", providing in writing, by email or otherwise, to the participating provider the name, address, and telephone number, to the extent possible, for any third party to which the contracting entity has granted access to the health care services of the participating provider] "Health care service", the same meaning given to the term in section 376.1350;
- (3) "Health carrier", the same meaning given to the term in section 376.1350. The term "health carrier" shall also include any entity described in subdivision (4) of section 354.700;
- (4) "Network plan", [health insurance] coverage offered by a health [insurance issuer]
 carrier for health care services provided by a participating provider under which the
 financing and delivery of [dental] the health care services are provided in whole or in part
 through a defined set of participating providers [under contract with the health insurance
 issuer];

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.

HB 100 2

 [(4)] (5) "Participating provider", a provider who, under a contract with a contracting entity, has agreed to provide [dental] health care services with an expectation of receiving payment, other than coinsurance, co-payments or deductibles, directly or indirectly from the contracting entity;

- [(5)] (6) "Provider", any person licensed under section 332.071.
- 2. A contracting entity shall not sell, assign, or otherwise grant a network plan access to [the dental services of] a participating [provider under a health care contract unless expressly authorized by the health care contract. The health care contract shall specifically provide that one purpose of the contract is the selling, assigning, or giving the contracting entity rights to the services of the participating provider, including network plans] provider's health care services until the contracting entity has notified the participating provider thirty days in advance of such participating provider's health care services being made available to the network plan's participants and the participating provider has agreed in writing separate from any other agreement entered into before the receipt of the notification. The notification shall identify the network plan, the health care services included, and a fee schedule if different from the network plan for which the participating provider is currently providing health care services.
- 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.
- 4.] A contracting entity that sells, assigns, or otherwise grants a network plan 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] health carrier to be used to reimburse the participating provider for the covered [dental] health care services.
- [5.] 4. A contracting entity that sells, assigns, or otherwise grants a network plan access to a participating provider's [dental] health care services shall ensure that an explanation of benefits or remittance advice furnished to the participating provider that delivers [dental] health care services [under the health care contract] for the network plan 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.

HB 100 3

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.]

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