

FIRST REGULAR SESSION
HOUSE COMMITTEE SUBSTITUTE FOR
HOUSE BILL NO. 100
102ND GENERAL ASSEMBLY

0619H.03C

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Section A. Section 376.1060, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 376.1060, to read as follows: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 benefit plan", the same meaning given to the term in section 376.1350;**
- (3) ~~["Network plan", health insurance coverage offered by a health insurance issuer under which the financing and delivery of dental services are provided in whole or in part through a defined set of participating providers under contract with the health insurance issuer]~~ **"Health care service", the same meaning given to the term in section 376.1350;**
- (4) **"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;**
- (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

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.

19 payment, other than coinsurance, co-payments or deductibles, directly or indirectly from the
20 contracting entity;

21 ~~[(5)]~~ (6) "Provider", any person licensed under section 332.071.

22 2. A contracting entity ~~[shall not sell, assign, or otherwise]~~ **may grant a health**
23 **benefit plan** access to ~~[the dental services of]~~ a participating ~~[provider under a health care~~
24 ~~contract unless expressly authorized by the health care contract. The health care contract~~
25 ~~shall specifically provide that one purpose of the contract is the selling, assigning, or giving~~
26 ~~the contracting entity rights to the services of the participating provider, including network~~
27 ~~plans]~~ **provider's health care services or contractual discounts provided in accordance**
28 **with a contract between a participating provider and a contracting entity if:**

29 (1) **The contract specifically states that the contracting entity may enter into an**
30 **agreement with third parties allowing the third parties to obtain the contracting entity's**
31 **rights and responsibilities as if the third party were the contracting entity, and the**
32 **provider chooses to participate in third-party access at the time the contract is entered**
33 **into or renewed. If the contracting entity is a health carrier, the third-party access**
34 **provision of any provider contract shall also specifically state that the contract grants**
35 **third-party access to the provider network and that the provider has the right to choose**
36 **not to participate in third-party access;**

37 (2) **The third party accessing the contract agrees to comply with all of the**
38 **contract's terms;**

39 (3) **The contracting entity identifies, in writing or electronic form to the**
40 **provider, all third parties in existence as of the date the contract is entered into or**
41 **renewed;**

42 (4) **The contracting entity identifies all third parties in existence in a list on its**
43 **internet website that is updated at least once every ninety days;**

44 (5) **The contracting entity notifies network providers that a new third party is**
45 **leasing or purchasing the network at least thirty days in advance of the relationship**
46 **taking effect;**

47 (6) **The contracting entity notifies the third party of the termination of a**
48 **provider network contract no later than thirty days from the termination date with the**
49 **contracting entity;**

50 (7) **A third party's right to a provider's discounted rate ceases as of the**
51 **termination date of the provider network contract;**

52 (8) **The provider is not already a participating provider of the third-party**
53 **network; and**

54 **(9) The contracting entity makes available a copy of the provider network**
55 **contract relied on in the adjudication of a claim to a participating provider within thirty**
56 **days of a request from the provider.**

57 3. ~~[Upon entering a contract with a participating provider and upon request by a~~
58 ~~participating provider, a contracting entity shall properly identify any third party that has been~~
59 ~~granted access to the dental services of the participating provider]~~ **No provider shall be**
60 **bound by or required to perform health care services under a provider network**
61 **contract that has been granted to a third party in violation of the provisions of this**
62 **section.**

63 4. A contracting entity that sells, assigns, or otherwise grants a **health benefit plan**
64 access to ~~[the dental services of]~~ a participating ~~[provider]~~ **provider's health care services**
65 shall maintain an internet website or a toll-free telephone number through which the
66 participating provider may obtain information which identifies the ~~[insurer]~~ **health carrier**
67 to be used to reimburse the participating provider for the covered ~~[dental]~~ **health care**
68 services.

69 5. A contracting entity that sells, assigns, or otherwise grants a **health benefit plan**
70 access to a participating provider's ~~[dental]~~ **health care services** shall ensure that an
71 explanation of benefits or remittance advice furnished to the participating provider that
72 delivers ~~[dental]~~ **health care services [under the health care contract]** **for the health benefit**
73 **plan** identifies the contractual source of any applicable discount.

74 6. ~~[All third parties that have contracted with a contracting entity to purchase, be~~
75 ~~assigned, or otherwise be granted access to the participating provider's discounted rate shall~~
76 ~~comply with the participating provider's contract, including all requirements to encourage~~
77 ~~access to the participating provider, and pay the participating provider pursuant to the rates of~~
78 ~~payment and methodology set forth in that contract, unless otherwise agreed to by a~~
79 ~~participating provider.~~

80 7. ~~A contracting entity is deemed in compliance with this section when the insured's~~
81 ~~identification card provides information which identifies the insurance carrier to be used to~~
82 ~~reimburse the participating provider for the covered dental services]~~ **(1) The provisions of**
83 **this section shall not apply if access to a provider network contract is granted to any**
84 **entity operating in accordance with the same brand licensee program as the contracting**
85 **entity or to any entity that is an affiliate of the contracting entity. A list of the**
86 **contracting entity's affiliates shall be made available to a provider on the contracting**
87 **entity's website.**

88 **(2) The provisions of this section shall not apply to a provider network contract**
89 **for dental services provided to beneficiaries of any state-sponsored health insurance**

90 **programs including, but not limited to, MO HealthNet and the state children's health**
91 **insurance program authorized in sections 208.631 to 208.658.**

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