

FIRST REGULAR SESSION

HOUSE BILL NO. 1071

103RD GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE REEDY.

2492H.011

JOSEPH ENGLER, Chief Clerk

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to insurance coverage for mental health services.

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

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be
2 known as section 376.1553, to read as follows:

376.1553. 1. As used in this section, terms shall have the same meanings as
2 ascribed to them in section 376.1350, and the term "cost-sharing" shall include any co-
3 payment, coinsurance, deductible, amount paid by an enrollee for health care services in
4 excess of a coverage limitation, or similar charge required by or on behalf of an enrollee
5 in order to receive a specific health care service covered by a health benefit plan.

6 2. If an enrollee is admitted to a hospital emergency room with a behavioral or
7 mental health condition and is transferred to another hospital that is not a participating
8 provider for that condition under the patient's health benefit plan:

9 (1) The health carrier shall not impose cost-sharing requirements for treatment
10 of the behavioral or mental health condition that are greater than the cost-sharing
11 requirements would be for treatment of the behavioral or mental health condition by a
12 participating provider; and

13 (2) The health carrier shall reimburse the hospital for treatment of the
14 behavioral or mental health condition at the same rate the hospital would be reimbursed
15 by MO HealthNet.

16 3. It shall constitute an unlawful practice within the meaning of section 407.020,
17 and any action authorized in sections 407.010 to 407.130 may be taken, if a health

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.

18 **benefit plan's provider network for treatment of behavioral or mental health conditions**
19 **is so inadequate that it threatens the life of its enrollees. It shall be a rebuttable**
20 **presumption that the health benefit plan's provider network is so inadequate that it**
21 **threatens the life of its enrollees if more than fifteen percent of its enrollees treated for a**
22 **behavioral or mental health condition are treated for the condition outside of the health**
23 **benefit plan's provider network.**

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