

HB 366 -- HEALTH CARE BENEFITS PROVIDED BY CERTAIN ORGANIZATIONS

SPONSOR: Pollitt

COMMITTEE ACTION: Voted "Do Pass" by the Standing Committee on Health and Mental Health by a vote of 12 to 2, with 1 voting present. Voted "Do Pass" by the Standing Committee on Rules-Legislative by a vote of 7 to 1 with 1 voting present.

This bill specifies that contracts for health care benefits, provided by a qualified membership organization, as such terms are defined in the bill, to its members will not be considered insurance under the laws of this state. A qualified membership organization providing a contract for health care benefits as specified in the bill must use the services of an entity permitted to provide health plan administration services, and agree in the contract with the administrator to be subject to processes for benefit determinations and claims payment procedures comparable to those required by law for health carriers and health benefit plans.

Financial risk under the contracts may be reinsured as provided by law, and the contracts and related applications and renewal forms must contain a notice stating that they are not insurance and are not covered by the Missouri Insurance Guaranty Association, as specified in the bill.

This bill is the same as HB 2082 (2024) and similar to HCS HB 464 (2023).

PROPONENTS: Supporters say that farmers and their families, in order to figure out their finances due to the inherent income variability of farming, have to contend with steep increases in premiums and resort to a member of the family holding an off-the-farm job for the purpose of obtaining insurance. Access to health care services is especially concerning for younger farmers, who may need to leave the business to find a job with benefits. The Tennessee Farm Bureau has had a similar system for 75 years, and nine other states have similar programs. If these plans weren't working well in other states, there would not be the demand for this type of service from these organizations. The current options for farmers are far too expensive, and this bill provides another option.

Testifying in person for the bill were Representative Pollitt; Bryant Kagay; Rich Rovak; Missouri Farm Bureau; FGA Action; Dylan Boling, Missouri Corn Growers Association; Theo Rieckhoff; Ben Sanders, Farm Bureau - Tennessee; Chris Brundick; Missouri Soybean Association; Association of Missouri Electric Cooperatives; Alfred Brandt, Missouri Dairy.

OPPONENTS: Those who oppose the bill say that the implementation of the bill could expose Missourians to medical and financial harm, as these types of programs are legally not considered to be insurance, and they can impose waiting periods, deny coverage, or cancel coverage altogether. Everyone in the State struggles to either find or afford their insurance, and it makes no sense to establish a plan for one specific group of Missourians that does not have to follow the same laws and regulations as all of the other groups in the State.

Testifying in person against the bill were National Multiple Sclerosis Society; American Heart Association; Arnie Dienoff; American Cancer Society Cancer Action Network; Blue Cross Blue Shield of Kansas City; Missouri Insurance Coalition.

OTHERS: Others testifying on the bill say that the Tennessee Hospital Association has had a positive experience with this implemented system.

Testifying in person on the bill were Missouri Hospital Association; Missouri Insurance Coalition.

Written testimony has been submitted for this bill. The full written testimony and witnesses testifying online can be found under Testimony on the bill page on the House website.