

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 5738H.011
 Bill No.: HB 2570
 Subject: Insurance - Health; Health Care; Health Care Professionals
 Type: Original
 Date: March 4, 2026

Bill Summary: This proposal creates provisions relating to insurance coverage of anesthesia services.

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND

FUND AFFECTED	FY 2027	FY 2028	FY 2029
General Revenue	(Unknown, Less than \$319,200)	(Unknown, Less than \$319,200)	(Unknown, Less than \$319,200)
Total Estimated Net Effect on General Revenue	(Unknown, Less than \$319,200)	(Unknown, Less than \$319,200)	(Unknown, Less than \$319,200)

ESTIMATED NET EFFECT ON OTHER STATE FUNDS

FUND AFFECTED	FY 2027	FY 2028	FY 2029
Other State Funds	(Unknown, Less than \$75,000)	(Unknown, Less than \$75,000)	(Unknown, Less than \$75,000)
Total Estimated Net Effect on <u>Other</u> State Funds	(Unknown, Less than \$75,000)	(Unknown, Less than \$75,000)	(Unknown, Less than \$75,000)

Numbers within parentheses: () indicate costs or losses.

ESTIMATED NET EFFECT ON FEDERAL FUNDS

FUND AFFECTED	FY 2027	FY 2028	FY 2029
Federal Funds	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)
Total Estimated Net Effect on <u>All</u> Federal Funds	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)

ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)

FUND AFFECTED	FY 2027	FY 2028	FY 2029
Total Estimated Net Effect on FTE	0	0	0

- Estimated Net Effect (expenditures or reduced revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.
- Estimated Net Effect (savings or increased revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.

ESTIMATED NET EFFECT ON LOCAL FUNDS

FUND AFFECTED	FY 2027	FY 2028	FY 2029
Local Government	\$0 or (Unknown)	\$0 or (Unknown)	\$0 or (Unknown)

FISCAL ANALYSIS

ASSUMPTION

§376.1245 – Anesthesia Services

Officials from the **Missouri Consolidated Health Care Plan (MCHCP)** state that as MCHCP is not a health care plan under the definition of 376.1350, this legislation would not apply to MCHCP using that definition. However, section 104.801 requires MCHCP to follow any law which mandates coverage of specific health benefits, services, or providers. Since this legislation does mandate benefits, services, or providers it would apply to MCHCP.

This bill includes a health insurance carrier mandate that in most cases will result in additional cost to the health plan, employer and employee.

The potential fiscal impact of this proposal is unknown but less than \$500,000.

Oversight assumes prohibiting policy or practices of limiting timeframes for payment of anesthesia services and restricting or excluding anesthesia time could increase health insurance costs for insurance plans. Oversight assumes the cost could be less than \$500,000 based on MCHCP's response. Oversight will reflect the fiscal impact as provided by MCHCP as the following:

General Revenue (63.84%): (Unknown, Less than \$319,200)

Federal Funds (21.31%): (Unknown, Less than \$106,550)

Other Funds (14.85%): (Unknown, Less than \$74,250)

Total: (Unknown, Less than \$500,000)

Officials from **City of Kansas City** state the proposed legislation has a potential negative fiscal impact of an indeterminate amount.

Oversight assumes all local political subdivisions could have a potential negative fiscal impact depending on if the plan carrier does or does not restrict or excluding anesthesia time. For fiscal note purposes, Oversight will reflect a \$0 or Unknown fiscal impact to local political subdivisions.

Officials from the **Department of Commerce and Insurance (DCI)** assume this proposal would prohibit health carriers and health benefit plans from establishing, implementing, or enforcing policies, practices or procedures that impose time limits for the payment of anesthesia services, or that restrict or exclude all anesthesia time in calculating payment for anesthesia services. These requirements would be applicable to excepted benefit plans. The language of the proposal also attempts to include the Missouri Consolidated Health Care Plan, Medicaid Managed Care Plans, and the MO HealthNet Division as entities to which its provisions would

apply.

The department believes the costs of this bill can be absorbed within current appropriations. However, should the cost exceed the anticipated amount, the department would request an increase to FTE and/or appropriations as appropriate through the budget process.

Officials from the DCI assume the cost of the proposal can be absorbed. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for this agency.

Officials from the **Missouri Department of Transportation (MoDOT)** assume the proposal will have no fiscal impact on their organization.

In response to similar legislation, SB 930 (2026), officials from **MoDOT** stated that the current MoDOT-MSHP plan carrier, does not restrict on medically necessary anesthesia services, so although a cost has been shown on similar legislation in previous years, MoDOT is no longer showing an impact. That could change if the plan adopted another administrator with this restriction.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for this agency.

Officials from the **Department of Social Services** and **Missouri Department of Conservation** each assume the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

Officials from the **Department of Public Safety - Missouri Highway Patrol** defer to the Missouri Department of Transportation for the potential fiscal impact of this proposal.

<u>FISCAL IMPACT – State Government</u>	FY 2027 (10 Mo.)	FY 2028	FY 2029
GENERAL REVENUE			
<u>Cost – MCHCP (\$376.1245) Anesthesia cost p.3</u>	(Unknown, Less than <u>\$319,200</u>)	(Unknown, Less than <u>\$319,200</u>)	(Unknown, Less than <u>\$319,200</u>)
ESTIMATED NET EFFECT ON GENERAL REVENUE	(Unknown, Less than <u>\$319,200</u>)	(Unknown, Less than <u>\$319,200</u>)	(Unknown, Less than <u>\$319,200</u>)

FEDERAL FUNDS			
<u>Cost – MCHCP (§376.1245) Anesthesia cost p.3</u>	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)
ESTIMATED NET EFFECT ON FEDERAL FUNDS	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)	(Unknown, Less than \$106,550)
OTHER STATE FUNDS			
<u>Cost – MCHCP (§376.1245) Anesthesia cost p.3</u>	(Unknown, Less than \$74,250)	(Unknown, Less than \$74,250)	(Unknown, Less than \$74,250)
ESTIMATED NET EFFECT ON OTHER STATE FUNDS	(Unknown, Less than \$74,250)	(Unknown, Less than \$74,250)	(Unknown, Less than \$74,250)

<u>FISCAL IMPACT – Local Government</u>	FY 2027 (10 Mo.)	FY 2028	FY 2029
LOCAL POLITICAL SUBDIVISIONS			
<u>Cost - Local Political Subdivisions Anesthesia cost (§376.1245) p.3</u>	\$0 or (Unknown)	\$0 or (Unknown)	\$0 or (Unknown)
ESTIMATED NET EFFECT ON LOCAL POLITICAL SUBDIVISIONS	\$0 or (Unknown)	\$0 or (Unknown)	\$0 or (Unknown)

FISCAL IMPACT – Small Business

A direct fiscal impact to small business medical services and equipment providers could be expected as a result of this proposal.

FISCAL DESCRIPTION

This bill prohibits health carriers or health benefit plans from establishing or implementing any policy or practice that imposes a time limit for the payment of anesthesia services provided during a medical or surgical procedure. Moreover, health carriers or health benefit plans are

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prohibited from establishing or implementing any policy that restricts or excludes all anesthesia time in calculating the payment of anesthesia services. Excepted benefit plans will be subject to the requirements of this bill.

This bill contains an emergency clause.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Missouri Consolidated Health Care Plan
Department of Commerce and Insurance
Department of Public Safety - Missouri Highway Patrol
Missouri Department of Conservation
Missouri Department of Transportation
City of Kansas City
Department of Social Services



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March 4, 2026



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