



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 3088		DATE: 3/4/2026	
COMMITTEE: General Laws			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: ADAM MEIER		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME: CICERO ACTION		TITLE: DIRECTOR OF HEALTH POLICY	
ADDRESS: 2112 RIO GRANDE ST.			
CITY: AUSTIN		STATE: TX	ZIP: 78705
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/4/2026 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: HAMPTON WILLIAMS		PHONE NUMBER: 573-893-4241	
REPRESENTING: MISSOURI INSURANCE COALITION		TITLE:	
ADDRESS: 220 EAST HIGH ST.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/4/2026 12:00 AM	

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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JAMES HARRIS		PHONE NUMBER: 573-761-7875	
REPRESENTING: FGA ACTION		TITLE:	
ADDRESS: 122 E. HIGH., SUITE 200			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/4/2026 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JOSH HAYNES		PHONE NUMBER: 573-934-1035	
REPRESENTING: ELEVANCE HEALTH		TITLE:	
ADDRESS:			
CITY:		STATE: MO	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/4/2026 12:00 AM	
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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCAT		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE: In-Person	SUBMIT DATE: 3/6/2026 11:46 PM	
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I am Opposed to this Bill. this Bill was clearly written for and give to the Bill Sponsor that clearly benefits Insurance Companies and the Insurance Coalition. This Bill is bad for Missouri Citizens and very bad State Public Policy.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: ERIC VANDER WEERD		PHONE NUMBER: 573-893-3700	
REPRESENTING: MISSOURI HOSPITAL ASSOCIATION		TITLE:	
ADDRESS: 4712 COUNTRY CLUB DR.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/4/2026 12:00 AM	
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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: SARAH BERRY		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE: Written	SUBMIT DATE: 3/4/2026 8:37 AM	
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HB 3088 proposes to prohibit several types of provisions in provider network contracts, including anti-steering clauses, anti-tiering clauses, gag clauses, and most-favored-nation clauses. The bill further declares such provisions void and unenforceable and imposes a fiduciary duty on health benefit plan issuers when steering or tiering providers.

While the stated goal of improving price transparency and network competition may be understandable, the structure of HB 3088 raises several significant legal concerns.

First, the bill broadly invalidates contract provisions and prohibits their inclusion in future agreements without establishing clear standards governing the scope of the prohibition. The sweeping prohibition on certain contractual arrangements may implicate constitutional protections against impairment of contracts under Article I, Section 13 of the Missouri Constitution and Article I, Section 10 of the United States Constitution, particularly where existing contractual relationships are affected through renewal or modification restrictions.

Second, the bill imposes a fiduciary duty on health benefit plan issuers when steering or tiering providers, but the statute provides no clear standard for determining what conduct satisfies the requirement that such actions occur “only for the primary benefit of the enrollee or policyholder.” Without defined criteria, this language risks creating substantial statutory vagueness and unpredictable liability exposure, particularly for insurers and plan administrators operating complex provider networks.

Third, HB 3088 may create federal preemption concerns under the Employee Retirement Income Security Act (ERISA). Many employer-sponsored health plans are governed by federal law, and state statutes that attempt to regulate plan administration or network design may be preempted where they relate directly to ERISA-regulated benefit plans. Courts have repeatedly held that state laws imposing operational requirements on plan administration may fall within ERISA’s broad preemption clause. See, e.g., *Gobeille v. Liberty Mutual Insurance Co.*, 577 U.S. 312 (2016).

Taken together, these provisions risk producing a statute that invites litigation from both insurers and health plan administrators while creating uncertainty for providers and patients operating within provider networks.

Improving transparency and competition within health care markets is a legitimate legislative goal. However, HB 3088 introduces significant legal ambiguity regarding contract enforcement, fiduciary

obligations, and potential federal preemption.

For these reasons, HB 3088 warrants careful reconsideration.

Legislative Notice:

HB 3088 broadly invalidates certain contractual provisions within provider network agreements while imposing undefined fiduciary obligations on plan issuers. Because these provisions may implicate contract impairment protections under Article I, Section 10 of the United States Constitution, Article I, Section 13 of the Missouri Constitution, and potential ERISA preemption under 29 U.S.C. §1144, the General Assembly should consider whether the bill creates foreseeable constitutional and federal statutory conflicts that may result in litigation concerning the enforceability of the statute.