

SENATE BILL NO. 550

103RD GENERAL ASSEMBLY

INTRODUCED BY SENATOR SCHROER.

1998S.01H

KRISTINA MARTIN, Secretary

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
2 one new section, to be known as section 376.1553, to read as
3 follows:

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

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

14 (1) The health carrier shall not impose cost-sharing
15 requirements for treatment of the behavioral or mental
16 health condition that are greater than the cost-sharing
17 requirements would be for treatment of the behavioral or
18 mental health condition by a participating provider; and

19 (2) The health carrier shall reimburse the hospital
20 for treatment of the behavioral or mental health condition
21 at the same rate the hospital would be reimbursed by MO
22 HealthNet.

23 3. It shall constitute an unlawful practice within the
24 meaning of section 407.020, and any action authorized in
25 sections 407.010 to 407.130 may be taken, if a health
26 benefit plan's provider network for treatment of behavioral
27 or mental health conditions is so inadequate that it
28 threatens the life of its enrollees. It shall be a
29 rebuttable presumption that the health benefit plan's
30 provider network is so inadequate that it threatens the life
31 of its enrollees if more than fifteen percent of its
32 enrollees treated for a behavioral or mental health
33 condition are treated for the condition outside of the
34 health benefit plan's provider network.

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