

SECOND REGULAR SESSION

SENATE BILL NO. 754

89TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR BANKS.

Read 1st time January 19, 1998, and 1,000 copies ordered printed.

TERRY L. SPIELER, Secretary.

S2566.011

AN ACT

To amend chapter 354, RSMo, by adding thereto two new sections relating to health service corporations and health maintenance organizations.

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

Section A. Chapter 354, RSMo, is amended by adding thereto two new sections, to be known as sections 354.207 and 354.546, to read as follows:

354.207. 1. A health services corporation shall allow enrollees to seek a second medical opinion or consultation from a second physician at no additional cost to the enrollee beyond what the enrollee would otherwise pay for an initial medical opinion or consultation from that second physician.

2. If an enrollee chooses to seek a second medical opinion, and if the health services corporation does not employ or contract with another physician with the expertise necessary to provide a second medical opinion, then the health services corporation shall arrange for a referral to another physician with the necessary expertise to provide a second opinion or consultation and ensure that the enrollee obtains the covered benefit at no greater cost to the enrollee than if the benefit were obtained from participating physicians.

354.546. 1. A health maintenance organization shall allow enrollees to seek a second medical opinion or consultation from the health maintenance organization's choice of other primary care physicians and specialty physicians at no additional cost to the enrollee beyond what the enrollee would otherwise pay for an initial medical opinion or consultation.

2. If an enrollee chooses to seek a second medical opinion, and if the health maintenance organization does not employ or contract with another physician with the expertise necessary to provide a second medical opinion, then the health maintenance

organization shall arrange for a referral to a physician with the necessary expertise to provide a second opinion or consultation and ensure that the enrollee obtains the covered benefit at no greater cost to the enrollee than if the benefit were obtained from participating physicians.

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