

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. No.: 5021S.01I  
Bill No.: SB 970  
Subject: Health Care; Insurance - Health; Pharmacy  
Type: Original  
Date: January 14, 2026

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Bill Summary: This proposal creates provisions relating to cost-sharing under health benefit plans.

**FISCAL SUMMARY**

**ESTIMATED NET EFFECT ON GENERAL REVENUE FUND**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Total Estimated Net Effect on General Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**ESTIMATED NET EFFECT ON OTHER STATE FUNDS**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
State Road Fund (1320)	\$0 or (Unknown, could exceed \$250,000)	\$0 or (Unknown, could exceed \$250,000)	\$0 or (Unknown, could exceed \$250,000)
<b>Total Estimated Net Effect on Other State Funds</b>	<b>\$0 or (Unknown, could exceed \$250,000)</b>	<b>\$0 or (Unknown, could exceed \$250,000)</b>	<b>\$0 or (Unknown, could exceed \$250,000)</b>

Numbers within parentheses: () indicate costs or losses.

**ESTIMATED NET EFFECT ON FEDERAL FUNDS**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Total Estimated Net Effect on All Federal Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)**

FUND AFFECTED	FY 2027	FY 2028	FY 2029
<b>Total Estimated Net Effect on FTE</b>	<b>0</b>	<b>0</b>	<b>0</b>

- 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
<b>Local Government</b>	<b>\$0 or (Unknown)</b>	<b>\$0 or (Unknown)</b>	<b>\$0 or (Unknown)</b>

## **FISCAL ANALYSIS**

### **ASSUMPTION**

#### **§376.448 - Enrollee's Cost Sharing**

Officials from the **Missouri Department of Transportation (MoDOT)** state this proposal would remove the ability to manage the PillarRx Copay Assistance Program for the MoDOT-MSHP Medical Plan. This will result in a loss of savings to the plan of over \$1,800,000 based on YTD 2025. The plan is contracted through 2026, so any renewals would not be able to include the copay assistance program after that time period.

MoDOT also assumes this bill requires all dollars paid by a manufacturer on behalf of a member to be applied towards the member deductible and accumulator. Members would move through their benefit phases more quickly, hit their annual out of pocket, and then the plan would pick up the additional cost (\$1,800,000).

**Oversight** assumes this proposal would require all health carriers and pharmacy benefit managers to count all payments toward an enrollee's out-of-pocket maximum (including money the enrollee pays directly, and money paid on the enrollee's behalf (third party or assistance program). Oversight assumes members could reach out-of-pocket maximums sooner and carriers could adjust plan pricing, so the State Road Fund could pay more in total premiums.

Since the exact increase would depend on several factors (how many enrollees currently pay amounts that aren't counted for under existing rules, etc.), Oversight will range the fiscal impact as \$0 or Unknown, could exceed \$250,000 to the State Road Fund. Oversight assumes this proposal could also have a fiscal impact on local political subdivisions.

Officials from the **Department of Commerce and Insurance** assume this proposal would require health carriers to include amounts paid by or on behalf of enrollees in for a medication for which a generic substitute is not available when calculating the enrollee's overall contribution to the plan's out-of-pocket maximum or cost-sharing requirements. It prohibits health carriers and pharmacy benefit managers from varying an enrollee's out-of-pocket maximum or cost-sharing requirements based on the availability of cost-sharing assistance programs for medications for which a generic substitute is not available. The proposal also creates an exception to this rule for high-deductible health plans with health savings accounts, in accordance with provisions of the IRS Code.

This proposal does not prohibit health carriers or health benefit plans from utilizing step therapy, and it specifically notes that its provisions do not apply to health benefit plans covered under the Labor Management Relations Act of 1947, 29 U.S.C. Section 141.

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

**Oversight** notes the above agency has stated that costs of this 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 Consolidated Health Care Plan, Department of Social Services, Missouri Department of Conservation, Oversight Division** and **City of Kansas City** each assume the proposal will have no fiscal impact on their respective organizations.

**Oversight** notes that the above mentioned agencies have stated the proposal would not have a direct fiscal impact on their organization. Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact on the fiscal note for this 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
<b>STATE ROAD FUND (1320)</b>			
<u>Cost – MoDOT (§376.448) Enrollee’s Cost Sharing p.3</u>	\$0 or (Unknown, could exceed <u>\$250,000</u> )	\$0 or (Unknown, could exceed <u>\$250,000</u> )	\$0 or (Unknown, could exceed <u>\$250,000</u> )
<b>ESTIMATED NET EFFEC ON THE STATE ROAD FUND (1320)</b>	<b>\$0 or (Unknown, could exceed <u>\$250,000</u>)</b>	<b>\$0 or (Unknown, could exceed <u>\$250,000</u>)</b>	<b>\$0 or (Unknown, could exceed <u>\$250,000</u>)</b>

<u>FISCAL IMPACT – Local Government</u>	FY 2027 (10 Mo.)	FY 2028	FY 2029
<b>LOCAL POLITICAL SUBDIVISIONS</b>			
<u>Cost – (§376.448) Enrollee’s Cost Sharing p.3</u>	\$0 or <u>(Unknown)</u>	\$0 or <u>(Unknown)</u>	\$0 or <u>(Unknown)</u>
<b>ESTIMATED NET EFFECT TO LOCAL POLITICAL SUBDIVISIONS</b>	<b>\$0 or <u>(Unknown)</u></b>	<b>\$0 or <u>(Unknown)</u></b>	<b>\$0 or <u>(Unknown)</u></b>

#### FISCAL IMPACT – Small Business

A direct fiscal impact to health carrier or pharmacy benefits manager could be expected as a result of this proposal.

#### FISCAL DESCRIPTION

This act provides that when calculating an enrollee's overall contribution to an out-of-pocket max or any cost-sharing requirement under a health benefit plan, a health carrier or pharmacy benefits manager shall include any amounts paid by the enrollee or paid on behalf of the enrollee for any medication for which a generic substitute is not available.

Additionally, no health carrier or pharmacy benefits manager shall design benefits in a manner that takes into account the availability of any cost-sharing assistance program for any medication for which a generic drug substitute is not available.

The provisions of this act shall apply to health benefit plans entered into, amended, extended, or renewed on or after August 28, 2026.

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

Department of Commerce and Insurance

Department of Public Safety - Missouri Highway Patrol

Department of Social Services

Missouri Department of Conservation

Missouri Department of Transportation

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Missouri Consolidated Health Care Plan  
Oversight Division  
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January 14, 2026



Jessica Harris  
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January 14, 2026