

FIRST REGULAR SESSION

SENATE BILL NO. 243

98TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SCHMITT.

Read 1st time January 14, 2015, and ordered printed.

ADRIANE D. CROUSE, Secretary.

0290S.02I

AN ACT

To amend chapter 208, RSMo, by adding thereto one new section relating to MO HealthNet managed care rates.

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

Section A. Chapter 208, RSMo, is amended by adding thereto one new section,
2 to be known as section 208.940, to read as follows:

208.940. 1. **Managed care organizations shall be required to**
2 **maintain medical loss ratios of at least eighty-five percent, as defined by**
3 **the National Association of Insurance Commissioners, for MO HealthNet**
4 **operations. If a managed care organization's medical loss ratio falls below**
5 **eighty-five percent over a cumulative period of three years, the managed**
6 **care organization shall be required to refund a portion of the capitation**
7 **rates paid to the managed care organization in a tiered amount equal to the**
8 **difference between the managed care organization's medical loss ratio and**
9 **eighty-five percent of the capitated payment to the managed care**
10 **organization. When the medical loss ratio is between eighty-five percent**
11 **and eighty percent, twenty-five percent of the tier shall be returned to the**
12 **state; when the medical loss ratio is less than eighty percent, seventy-five**
13 **percent of the tier shall be returned to the state.**

14 2. **For services that do not meet the definition of emergency services,**
15 **a Medicaid managed care organization shall be required to reimburse out**
16 **of network providers at the published MO HealthNet Medicaid fee-for-**
17 **service schedule at the time of the service. A Medicaid managed care**
18 **organization shall document three good faith attempts to include the**
19 **provider in their network, using their standard participating provider**
20 **agreement and fee schedule.**

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