

SECOND REGULAR SESSION

SENATE BILL NO. 747

90TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SINGLETON.

Pre-filed December 29, 1999, and 1,000 copies ordered printed.

TERRY L. SPIELER, Secretary.

3166S.021

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to health insurance coverage.

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

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be known as section 376.1364, to read as follows:

376.1364. Each entity offering individual and group health insurance policies providing coverage on an expense-incurred basis, individual and group service or indemnity type contracts issued by a nonprofit corporation, individual and group service contracts issued by a health maintenance organization, all self-insured group arrangements to the extent not preempted by federal law, and all managed health care delivery entities of any type or description that provide coverage for surgical procedures must reply to an enrollee's surgeon or primary care physician within forty-eight hours, when an enrollee has been pre-approved for a surgical procedure, regarding such enrollee's eligibility for the surgical procedure. If the enrollee is determined to be eligible for the surgical procedure, then the entity is bound to its eligibility determination for thirty days following notification to the enrollee, the enrollee's surgeon, or the enrollee's primary care physician. Coverage for surgical procedures shall be subject to other terms and conditions as applicable to other benefits.

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