

FIRST REGULAR SESSION

# SENATE BILL NO. 424

## 91ST GENERAL ASSEMBLY

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INTRODUCED BY SENATORS JACOB, DePASCO, STAPLES, WIGGINS, MATHEWSON, QUICK, STOLL,  
CARTER, SIMS, BENTLEY, DOUGHERTY, BLAND, SCOTT, CASKEY, HOUSE AND GOODE.

Read 1st time February 6, 2001, and 1,000 copies ordered printed.

TERRY L. SPIELER, Secretary.

1774S.011

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## AN ACT

To amend chapter 354, RSMo, by adding thereto one new section relating to women's health services.

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

Section A. Chapter 354, RSMo, is amended by adding thereto one new section, to be known as section 354.549, to read as follows:

**354.549. 1. 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 obstetrical/gynecological and pharmaceutical coverage, and which are delivered, issued for delivery, continued or renewed in this state on or after January 1, 2002, shall:**

- (1) Provide enrollees with direct access to obstetrical/gynecological services through open referral whenever such services are medically appropriate; and**
- (2) Annually notify enrollees of the cancer screenings, such as pap tests and mammograms, that are covered by the enrollees' health care plans;**
- (3) Provide coverage for bone density testing for postmenopausal women; and**
- (4) Provide one hundred percent coverage for contraceptives.**

**2. For purposes of this section, "open referral" means an enrollee may obtain treatment for covered benefits without a referral from a primary care physician from any person licensed to provide such treatment.**

**3. The provisions of this section shall not apply to a supplemental insurance policy, including a life care contract, accident only policy, specified disease policy, hospital policy providing a fixed daily benefit only, Medicare supplement policy or long-term care policy.**

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