FIRST REGULAR SESSION

SENATE BILL NO. 90

96TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR DEMPSEY.

Read 1st time January 11, 2011, and ordered printed.

0752S.01I

TERRY L. SPIELER, Secretary.

AN ACT

To repeal section 103.089, RSMo, and to enact in lieu thereof one new section relating to health care benefits provided to Medicare eligible participants participating in the state employee health insurance program.

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

Section A. Section 103.089, RSMo, is repealed and one new section 2 enacted in lieu thereof, to be known as section 103.089, to read as follows:

103.089. Participants in the program of medical benefits coverage provided by sections 103.003 to 103.175 who are eligible for Medicare benefits and 23 who are not eligible for the program of medical benefits coverage provided under sections 103.083 to 103.098 to be their primary plan of coverage benefits shall be 4 provided [the same] substantially similar benefits provided participants who 5are not eligible for Medicare benefits. Medical benefits coverage provided under 6 sections 103.003 to 103.175 shall be coordinated with Medicare benefits for 7 participants covered by part A or part B, or both, of Medicare benefits, or for 8 9 participants eligible for but not covered by part A or part B, or both, of Medicare benefits, reduced by an amount determined by the claims 10 11 administrator to provide a benefit equivalent to the amount which would be provided on a coordination of benefit basis for such participants [not] if such 1213**participants were** covered by part A or part B, or both, of Medicare benefits. As used in sections 103.083 to 103.098, the term "Medicare benefits" shall include 14those medical benefits provided by Title XVIII, A and B, Public Law 89-97, 1965 15amendments to the federal Social Security Act (42 U.S.C. section 301, et seq.) and 1617amendments thereto. Any participating member agency having employees or 18eligible retirees not covered by Medicare shall authorize the plan at its option to

enroll those individuals for medical benefits as provided by Title XVIII, A and B, Public Law 89-97, 1965 amendments to the federal Social Security Act whenever they become eligible for such benefits and the plan shall pay the premium for such enrollment on behalf of that person. The Medicare premium amounts shall be included in the rate established by the actuary for providing medical benefits coverage to such a participating member agency. Anyone not authorizing this Medicare enrollment shall be denied coverage.



Bill

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