SENATE BILL NO. 1147

103RD GENERAL ASSEMBLY

INTRODUCED BY SENATOR GREGORY (21).

5475S.01I

KRISTINA MARTIN, Secretary

AN ACT

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

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

Section A. Chapter 376, RSMo, is amended by adding thereto

- 2 one new section, to be known as section 376.1553, to read as
- 3 follows:

376.1553. 1. As used in this section, terms shall

- 2 have the same meanings as ascribed to them in section
- 3 376.1350; and the term "cost-sharing" shall include any co-
- 4 payment, coinsurance, deductible, amount paid by an enrollee
- 5 for health care services in excess of a coverage limitation,
- 6 or similar charge required by or on behalf of an enrollee in
- 7 order to receive a specific health care service covered by a
- 8 health benefit plan.
- 9 2. If an enrollee is admitted to a hospital emergency
- 10 room with a behavioral or mental health condition and the
- 11 hospital is not a participating provider for that condition
- 12 under the enrollee's health benefit plan, or if the enrollee
- 13 is transferred to another hospital that is not a
- 14 participating provider for that condition under the
- 15 patient's health benefit plan:
- 16 (1) The health carrier shall not impose cost-sharing
- 17 requirements for treatment of the behavioral or mental

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health condition that are greater than the cost-sharing requirements would be for treatment of the behavioral or mental health condition by a participating provider; and

- (2) The health carrier shall reimburse the hospital for treatment of the behavioral or mental health condition at the same rate the hospital would be reimbursed by MO HealthNet or Medicare, whichever is greater.
- 3. It shall constitute an unlawful practice within the meaning of section 407.020, and any action authorized in sections 407.010 to 407.130 may be taken, if a health benefit plan's provider network for treatment of behavioral or mental health conditions is so inadequate that it threatens the life of its enrollees. It shall be a rebuttable presumption that the health benefit plan's provider network is so inadequate that it threatens the life of its enrollees if more than fifteen percent of its enrollees treated for a behavioral or mental health condition are treated for the condition outside of the health benefit plan's provider network.

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