

FIRST REGULAR SESSION

SENATE BILL NO. 215

90TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR MATHEWSON.

Read 1st time January 6, 1999, and 1,000 copies ordered printed.

TERRY L. SPIELER, Secretary.

S1020.011

AN ACT

To repeal sections 103.083 and 103.130, RSMo 1994, relating to the health plan for state employees, and to enact in lieu thereof two new sections relating to the same subject.

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

Section A. Sections 103.083 and 103.130, RSMo 1994, are repealed and two new sections enacted in lieu thereof, to be known as sections 103.083 and 130.130, to read as follows:

103.083. The board shall provide or contract, or both, on its own behalf, for medical benefits coverage and services for persons covered under sections 103.003 to 103.175 and enrolled in the plan; **provided however, that such provision or contract, or both shall be:**

- (1) Made or renewed annually for a term no longer than twelve months; and**
- (2) For medical benefits coverage and services of persons covered pursuant to sections 103.003 to 103.175, and enrolled in the plan, shall be based upon actuarial analysis and loss experience of the participating member agencies enrolled in the plan on a retroactive basis.**

The board may contract for medical benefits coverage with alternative delivery health care programs where available. Medical expenses shall also include expenses for comparable benefits for employees who rely solely on spiritual means through prayer for healing.

103.130. Each participating member agency may elect by majority vote of its governing body, to join the plan and cover its employees, retirees, and their dependents under the plan as follows:

- (1) The clerk or secretary of the participating member agency shall certify the election to the board within ten working days after the vote of the governing body;

EXPLANATION--Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

(2) The board shall establish a procedure for considering the election of the agencies. Acceptance of the agency into the plan shall be by action of the board and shall be based upon an actuarial analysis [or any other determination that the board deems appropriate] **of the agency's experience, and the impact of such experience upon the health care plans providing coverage to the Missouri consolidated health care plan, if said agency is accepted into the plan;**

(3) The agency shall supply all available information requested by the board that is necessary to complete an actuarial analysis of the agency and make a determination of the fiscal impact that inclusion of the agency would have on the plan;

(4) The effective date of the participating member agency's coverage will be the first day [of the month so requested by the agency and approved by the board] **of the year following open enrollment and acceptance of the application of an agency pursuant to this section, to be accepted into the plan;**

(5) The participating member agency must offer coverage under the plan to all of its eligible employees, retirees, and dependents.

✓
Bill

Copy