

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 1030H.07C
 Bill No.: HCS for SS for SCS for SB 43
 Subject: Health Care; Insurance - Health; Victims of Crime; Holidays and Observances;
 Crimes and Punishment; Pharmacy
 Type: Original
 Date: April 28, 2021

Bill Summary: This proposal modifies provisions relating to health care.

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND			
FUND AFFECTED	FY 2022	FY 2023	FY 2024
General Revenue Fund	(Could exceed \$1,682,055)	(Could exceed \$1,724,031)	(Could exceed \$1,732,192)
Total Estimated Net Effect on General Revenue	(Could exceed \$1,682,055)	(Could exceed \$1,724,031)	(Could exceed \$1,732,192)

ESTIMATED NET EFFECT ON OTHER STATE FUNDS			
FUND AFFECTED	FY 2022	FY 2023	FY 2024
Board of Pharmacy Fund (0637)*	(Less than \$300,000)	(Less than \$300,000)	(Less than \$300,000)
Total Estimated Net Effect on <u>Other</u> State Funds	(Less than \$300,000)	(Less than \$300,000)	(Less than \$300,000)

*Oversight notes this legislation (§338.710) modifies the expiration date of the existing RX Cares for Missouri Program from August 28, 2019, to August 28, 2026. DCI indicated this program is still operational and planned expenditures for FY '21 are estimated at \$300,000. Oversight reflects the cost of continuation of the program in the fiscal note.

Numbers within parentheses: () indicate costs or losses.

ESTIMATED NET EFFECT ON FEDERAL FUNDS			
FUND AFFECTED	FY 2022	FY 2023	FY 2024
Total Estimated Net Effect on <u>All</u> Federal Funds	\$0	\$0	\$0

ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)			
FUND AFFECTED	FY 2022	FY 2023	FY 2024
General Revenue Fund	4 FTE	4 FTE	4 FTE
Total Estimated Net Effect on FTE	4 FTE	4 FTE	4 FTE

- Estimated Net Effect (expenditures or reduced revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.
- Estimated Net Effect (savings or increased revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.

ESTIMATED NET EFFECT ON LOCAL FUNDS			
FUND AFFECTED	FY 2022	FY 2023	FY 2024
Local Government	(Unknown)	(Unknown)	(Unknown)

FISCAL ANALYSIS

ASSUMPTION

§9.236

Oversight assumes the designation of “Sick Cell Awareness Week” will have no fiscal impact on state or local governments.

§190.053 – Ambulance District Provisions

In response to a similar proposal from this year (SB 512), officials from the **Department of Health and Senior Services**, the **Office of the Secretary of State**, the **Joint Committee on Administrative Rules**, the cities of: **Claycomo, Corder, Kansas City, O’Fallon, Springfield, St. Louis Budget Division** and **Crawford County 911Board** and **Nodaway County Ambulance District** each assume the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

§§173.260, 190.001, 190.098 - 190.257 and 287.243 – Time-Critical Diagnosis Provisions

In response to a similar proposal from this year (HCS for HB 1295), officials from the **Department of Health and Senior Services (DHSS)** provided the following information:

§190.200 adds trauma centers to the list for which the DHSS provides the specified services.

§190.241 allows site reviews of trauma, stroke, or ST-Elevation Myocardial Infarction (STEMI) centers to occur on-site or by any reasonable means of communication, or by any combination thereof. Further, requires site reviews to occur once every three years. Further, removes the requirement for STEMI centers to submit data to DHSS and requires DHSS to access such data through national data registries or data banks. Hospitals will not be found in noncompliance if DHSS fails to obtain the data from the registries.

The Division of Regulation and Licensure, Section for Health Standards and Licensure (HSL) is responsible for performing surveys related to Time-Critical Diagnosis (TCD) care.

Currently trauma validation surveys are every five years, stroke validation surveys are every four years, and STEMI validation surveys are every three years. The proposed legislation would change the requirements to place all three programs in a three year validation survey cycle.

HSL assumes it will require the following additional FTE beginning September 1, 2021, to meet the requirements of the proposed legislation:

- Two (2) FTE Registered Nurses (salary \$56,539) will be needed to conduct inspections and investigate complaints of the approximately 157 programs. These staff are assumed to be telecommuters and are expected to travel extensively; it is assumed that the travel cost will be \$10,103 annually for each.
- One (1) Research Data Analyst (Salary \$50,050) will be needed to access, abstract, and analyze the data of the approximately 157 programs.
- One (1) Administrative Support Assistant (salary \$21,675) will be needed to provide support for the program.

HSL assumes a need to access an estimate of ten (10) national data registries or data banks to ensure statutory compliance. HSL estimates subscription cost of access for one Research Data Analyst at approximately \$18,000 per year per data registry or data bank for a total of \$180,000 per year (\$18,000 x 10 subscriptions).

The proposed legislation allows site visits to be conducted by any means of communication. Should a virtual survey be utilized via the use of technology, HSL would need support from Office of Administration – Information Technology Services Division (ITSD). The State of MO enterprise unified communications (UC) tools could be used for voice and video calls with screen sharing. Documents could be shared across the secure channels of Box.com or sFTP. Memberships to UC (\$12/mo. per user), Box.com (\$21/mo. per user), and sFTP (\$3/mo. per user) would result in an annual cost of \$432 per user (\$12 + \$21 + \$3 x 12 months). In addition, the proposed legislation would require additional storage in the State Data Center (\$92/mo.) resulting in an annual cost of \$1,104 (\$92 x 12 months).

§190.257 establishes the “Time-Critical Diagnosis Advisory Committee” consisting of 16 members. Further, requires DHSS to include travel costs for the members in its budget. HSL assumes the TCD Committee will meet annually. At \$130 per diem reimbursement rate for meal and hotel costs, travel expenses are assumed to be \$1,820 annually (14 x \$130).

Oversight notes DHSS included estimated ITSD costs within their fiscal note response. For fiscal note purposes, Oversight will separate out these costs.

Oversight does not have any information to the contrary and will use DHSS estimated costs for fiscal note purposes.

In response to a similar proposal from this year (HCS for HB 1295), officials from the **Fruitland Area Fire Protection District** stated that the only fiscal impact that would affect the Fire District would be if equipment upgrades were needed or required; however, these would be expenditures as a cost of providing care and are manageable expenses.

In response to a similar proposal from this year (HCS for HB 1295), officials from the **Department of Commerce and Insurance**, the **Office of the Governor**, and the **Nodaway County Ambulance District** each assumed the proposal will have no fiscal impact on their

respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

In response to a similar proposal from this year (HCS for HB 1295), officials from the **Cole Camp Ambulance District**, the **Crawford County 911 Board** and the **Hermann Area Hospital District** assumed the proposal would have no fiscal impact on their organizations.

§§192.2520 & 197.135 – Justice for Survivors Act

In response to a similar proposal from this year (HCS for HB 1179), officials from the **Department of Health and Senior Services**, the **Department of Public Safety - Missouri Highway Patrol** and the **Department of Social Services** each assumed the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

In response to a similar proposal from this year (HB 1179), from the **Hermann Area Hospital District** assumed the proposal will have no fiscal impact on their organization. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for this agency.

§§217.199 & 221.065 - Hygienic products to offenders

In response to a similar proposal from this year (HB 318), officials from the **Department of Corrections (DOC)** assumed the proposal will have no fiscal impact on their organization. In FY20, the DOC was appropriated additional funding to support these costs.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for this agency.

Oversight contacted the DOC to determine the amount of funding appropriated to them for feminine hygiene products. From a new decision item beginning in FY 2020, the DOC was appropriated \$113,574 in General Revenue funds. This amount, combined with the \$114,774 in funding already within DOC's budget, brings the total department appropriations for feminine hygiene products to \$228,348 for FY 2020, FY 2021, and FY 2022 as no changes were made to the appropriation in FY 2021 or requested in FY 2022.

In response to a similar proposal from this year (HB 318), officials from the **Boone County Sheriff's Department** stated these items are currently supplied to detainees at no cost and as needed or requested.

In response to a similar proposal from this year (HB 318), officials from the **Cape Girardeau County Sheriff's Department** and the **Clay County Sheriff's Department** responded but did not provide a fiscal impact.

In response to a similar proposal from this year (HB 318), officials from the **Lewis County Sheriff's Department** stated feminine products are provided at no cost to the inmate.

In response to a similar proposal from this year (HB 318), officials from the **Ellisville Police Department** stated this will have a very minor impact but both reasonable and appropriate.

In response to a similar proposal from this year (HB 318), officials from the **Crestwood Police Department** stated no discernible fiscal impact. The Crestwood Police Department already supplies these items when necessary.

In response to a similar proposal from this year (HB 318), officials from **Clinton County, the Ellington Police Department, the Kansas City Police Department, the Kimberling City Police Department, the St. John Police Department, and the St. Louis County Police Department** each assumed the proposal will have no fiscal impact on their respective organizations.

Oversight notes there may be some county or city jails that do not provide both tampons and napkins for free. Therefore, the impact to local governments will be presented as \$0 or (Unknown).

§§338.010 -338.730 - HIV Preexposure and Postexposure Prophylaxis

In response to a similar proposal from this year (SB 79), officials from the **Department of Commerce and Insurance, the Missouri Consolidated Health Care Plan, the Department of Transportation, the Department of Public Safety - Missouri Highway Patrol, the Missouri Department of Conservation, the Office of Administration, the Department of Social Services and the Department of Health and Senior Services** each assumed the proposal will have no fiscal impact on their respective organizations.

Oversight notes that the above mentioned agencies have each stated the proposal would not have a direct fiscal impact on their respective organizations. Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact on the fiscal note for these sections.

§338.710 – Extension of the RX Cares for Missouri Program

In response to a similar proposal (SB 519), officials from the **Department of Commerce and Insurance (DCI)** assumed the proposal will have no fiscal impact on their organization.

Oversight notes this legislation modifies the expiration date of the RX Cares for Missouri Program from August 28, 2019, to August 28, 2026. DCI indicated this program is still operational and planned expenditures for FY '21 are estimated at \$300,000. (Current expenditures as of 11/30/20 are \$52,290). Listed below are past expenditures for this program.

1. FY 2019 - \$174,198.23 (media services)
2. FY 2020 - \$220,385.71 (medication collection/destruction)
3. FY 2021 - \$ 52,290.00 (medication collection/destruction) as of 11/30/2020 (The Board has not received any invoices after 11/30/2020)

For fiscal note purposes, Oversight will reflect an annual cost to the Board of Pharmacy Fund (0637) (cost of continuance of this program) of less than \$300,000.

§376.1228 – Health coverage for hearing aids for children under 18:

In response to a previous version, officials from the **Department of Commerce and Insurance (DCI)** stated the Affordable Care Act (ACA) requires all non-grandfathered individual and small group qualified health plans to cover a core set of healthcare services within 10 essential health benefit (EHB) categories. In 2011, Missouri like other states adopted its core benchmark plan that defined the core benefits these plans must offer in the state. The ACA also requires that the cost of a new coverage mandate added by a state after adoption of its benchmark plan that is above and beyond the EHB benchmark will be the responsibility of the state.

45 C.F.R 155.170 requires states to defray the cost of additional required benefits mandated by a state on or after January 1, 2012.

Documentation provided by the U. S. Department of Health and Human Services, Center for Consumer Information & Insurance Oversight (CCIIO) in Oct. 2018 instructions states that:

“...although it is the state’s responsibility to identify which state required benefits require defrayal, states must make such determinations using the framework finalized at §155.170, which specifies that benefits required by state action taking place on or before December 31, 2011, may be considered EHB, whereas benefits required by state action taking place after December 31, 2011, other than for purposes of compliance with federal requirements, are in addition to EHB and must be defrayed by the state. For example, a law requiring coverage of a benefit passed by a state after December 31, 2011, is still a state mandated benefit requiring defrayal even if the text of the law says otherwise.”

This bill requires that “Each health carrier or health benefit plan that offers or issues health benefit plans that are delivered, issued for delivery, continued, or renewed in this state on or after January 1, 2022, shall, at a minimum, provide coverage to children under eighteen years of age for all hearing aids covered for children who receive MO HealthNet benefits under section 208.151.”

This provision appears to create new mandates for which the state must defray payments, as required under federal law. Specifically, this bill appears to require that health benefit plans cover hearing aids for children under the age of 18. As a result, the state may be required to defray the actuarial cost of new coverage requirement and make payments to either issuers or

beneficiaries to negate increased or potentially increased premiums. DCI will research the potential impact of increased utilization and the potential future cost to general revenue.

Further, Section 1557 of the ACA prohibits health plan from discriminating in providing benefits based on race, color, national origin, sex, age and disabilities – if they are receiving federal financial assistance. In this case federal financial assistance would include Advance Premium Tax Credits or APTC.

The following is an excerpt from the November 26, 2014 federal register; “...we caution both issuers and the States that age limits are discriminatory when applied to services that have been clinically effective at all ages. For example, it would be arbitrary to limit a hearing aid to enrollees who are 6 years of age or younger, since there may be some older enrollees for whom a hearing aid is medically necessary...”

The following is an estimate of potential costs and utilization provided by DCI.

Using Current Population Survey data for 2019, published by the US Bureau of Census, it is estimate that 1,010,184 of insureds will fall under the mandate.

Mo pop <=18	1,449,332
% with Private Insurance	69.7%
w/ private insurance	1,010,184

Of these 1,010,184, the number who may experience hearing loss are:

Prevalence estimate: 1.7/1000*	1,717
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Source:

*CDC, Hearing Screening and Follow-up Survey Population: Screened infants. Available at <https://www.cdc.gov/ncbddd/hearingloss/data.html>

Average cost of hearing aid; \$2,805

Average replacement period: Every four years

Source: Survey of audiologists, available at <https://www.hearingtracker.com/how-much-do-hearing-aids-cost>

The average annual cost per hearing impaired individual would be cost divided by the replacement period, or $\$2,805 / 4 = \701

Total estimated annual cost;

#Prevalence estimate: 1.7/1000	\$1,204,266
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If the provisions SB 43 become law, the Department of Commerce and Insurance may need a new budget decision item from General Revenue to cover the potential cost of defrayal.

Oversight has no information to the contrary, therefore, Oversight will reflect the updated response provided by DCI of (Could exceed \$1,200,000) cost to the General Revenue Fund to reimburse various entities to defray the additional costs resulting from the new coverage mandate as described in this proposal.

In response to a previous version, officials from **Missouri Department of Transportation** find that that the MoDOT/Patrol medical plan provides coverage equal to those services provided to MoHealthNet recipients, therefore, MoDOT assumes the proposal will have no fiscal impact on their organization.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note to this agency.

In response to a previous version, officials from the **Missouri Consolidated Health Care Plan**, the **Department of Social Services** and the **Missouri Department of Conservation** each assume the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

In response to a previous version, officials from the **Department of Public Safety - Missouri Highway Patrol** defer to the Missouri Department of Transportation for the potential fiscal impact of this proposal.

In response to a previous version, officials from the Cities: **Claycomo, Corder, Hughesville, Kansas City, O'Fallon, Springfield and St. Louis Budget Division** each assumed the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

Oversight is unsure whether each local political subdivision's health benefit plan covers hearing aids for children equal to coverage provided by MoHealthNet; therefore, Oversight will reflect a \$0 to (Unknown) cost to Local Political Subdivisions.

§376.1551- Mental Health Insurance Coverage

In response to a similar proposal from this year (HCS for HB 889), officials from the **Missouri Department of Transportation**, the **Missouri Consolidated Health Care Plan**, **Missouri Department of Conservation**, the **Department of Commerce and Insurance**, the **Office of Administration**, the **Department of Social Services** and the **Department of Mental Health** each assumed the proposal will have no fiscal impact on their respective organizations.

Oversight notes that the above mentioned agencies have stated the proposal would not have a direct fiscal impact on their organization. Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact on the fiscal note for these agencies.

In response to a similar proposal from this year (HCS for HB 889), officials from the **Department of Public Safety - Missouri Highway Patrol** defer to the Department of Transportation to estimate the fiscal impact of the proposed legislation on their organization.

In response to a similar proposal from this year (HCS for HB 889), officials from the **City of Kansas City, City of Springfield, City of O’Fallon**, and the **City of Corder** each assumed no fiscal impact from the proposal.

According to the Centers for Medicare & Medicaid Services web site (CMS.gov), “(t)he Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) is a federal law that generally prevents group health plans and health insurance issuers that provide mental health or substance use disorder (MH/SUD) benefits from imposing less favorable benefit limitations on those benefits than on medical/surgical benefits.”

Oversight assumes health insurance policies utilized by the state and by local political subdivisions will be in compliance with these federal requirements. Therefore, Oversight will assume the section will not have a material fiscal impact.

§376.1575 – Health Care Practitioners Credentialing

In response to a similar proposal from this year (HB 1002), officials from the **Department of Commerce and Insurance**, the **Department of Health and Senior Services**, the **Department of Mental Health** and the **Department of Social Services** each assumed the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

§§565.058-574.204 – Health Care Workers Protection

In response to a similar proposal from this year (HCS for HB 1022), officials from the **Attorney General’s Office**, the **Department of Commerce and Insurance**, the **Department of Corrections**, the **Department of Health and Senior Services**, the **Department of Mental Health**, the **Department of Public Safety - Missouri Highway Patrol**, the **Department of Social Services**, the **Missouri Department of Transportation**, the **Office of the State Courts Administrator**, the **Office of the State Public Defender**, the **City of Claycomo**, the **City of Jefferson City**, the **City of Kansas City**, the **City of Springfield**, the **Boone County Health Department**, the **Kansas City Health Department**, the **St. Joseph Police Department**, the **St. Louis County Police Department**, the **Cass County PWSD #2**, the **Hancock Street Light District**, the **Metropolitan St. Louis Sewer District**, the **Schell City Water Department**, the

South River Drainage District, the St. Charles County PWS #2, and the Wayne County PWS #2 each assume the proposal will have no fiscal impact on their respective organizations.

In response to a similar proposal from this year (HCS for HB 1022), officials from the **Missouri Office of Prosecution Services (MOPS)** assumed the proposal will have no measurable fiscal impact on MOPS. The enactment of new crimes (574.203.2 and 574.204.2) creates additional responsibilities for county prosecutors and the circuit attorney which may, in turn, result in additional costs, which are difficult to determine.

In response to a similar proposal from this year (HCS for HB 1022), officials from the **Kansas City Police Department, the Newton County Health Department, the Crawford County 911 Board, the Nodaway County Ambulance District, and the Hermann Area Hospital District** each assumed the proposal will have no fiscal impact on their respective organizations.

In response to similar legislation from 2021 (SB 513), officials from the **City of Corder, the City of O'Fallon, the City of St. Louis, the Corder Water/Wastewater, the Lexington Water/Wastewater, and the Little Blue Valley Sewer** each assumed the proposal will have no fiscal impact on their respective organizations.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

Oversight assumes there will be few convictions of these new crimes. Therefore, Oversight assumes court costs and fine revenue associated with these new provisions would not be material.

§§579.040 & 579.076 – Distribution of Hypodermic Needles

In response to a similar proposal from this year (Perfected SS for SB 64), officials from the **Department of Public Safety – Director's Office, the Columbia/Boone County Department of Public Health and Human Services and the Newton County Health Department** assumed the proposal will have no fiscal impact on their organization. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

In response to the proposal prior to perfection, officials from the **Department of Health and Senior Services (DHSS)** stated if passed, Senate Substitute for SB 64 would require any entity that possesses, distributes, or delivers hypodermic needles or syringes for the purpose of operating a syringe access program or mitigating health risks that are associated with unsterile drug use to register with the DHSS Division of Community and Public Health.

The duties associated with the registration of entities would require approximately 25 hours annually for a Public Health Program Representative (average salary \$53,230). Based on 2,080 working hours per year this would require 0.012 FTE (25 hours / 2,080) for an annual personal

service cost of \$639 ($\$53,230 \times 0.012$ FTE). The DHSS anticipates being able to absorb these costs; however, until the FY22 budget is final cannot identify specific funding sources.

Oversight assumes the DHSS has sufficient staff and resources available to absorb the additional data entry required by this proposal and will present no fiscal impact for DHSS for this fiscal note.

In response to a similar proposal from this year (Perfectured SS for SB 64), officials from the **Kansas City Health Department (KCHD)** stated this proposal would have a fiscal impact on their organization. **Oversight** notes the KCHD did not provide any additional information relating to the potential fiscal impact of this proposal. Therefore, for fiscal note purposes, Oversight assumes any fiscal impact incurred by the KCHD would be minimal and absorbable within current staffing and funding levels and no fiscal impact will be presented for fiscal note purposes.

In response to a similar proposal from this year (Perfectured SS for SB 64), officials from the **Department of Corrections**, the **Missouri Office of Prosecution Services** and the **Office of the State Courts Administrator** each assumed the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

<u>FISCAL IMPACT – State Government</u>	FY 2022 (6 Mo.)	FY 2023	FY 2024
GENERAL REVENUE FUND			
<u>Costs – DHSS (§§190.241 and 190.257) p. 3-4</u>			
Personal service	(\$154,003)	(\$186,651)	(\$188,518)
Fringe benefits	(\$91,776)	(\$110,755)	(\$111,385)
Data Registry Access	(\$180,000)	(\$184,500)	(\$189,113)
Equipment and expense	(\$53,732)	(\$39,222)	(\$40,201)
Total Costs – DHSS	(\$479,511)	(\$521,128)	(\$529,217)
FTE Change – DHSS	4 FTE	4 FTE	4 FTE
<u>Costs – OA, ITSD (§§190.241 and 190.257) p. 3-4</u>			
Storage and subscription costs	(\$2,544)	(\$2,903)	(\$2,975)
<u>FISCAL IMPACT – State Government (continued)</u>	FY 2022 (6 Mo.)	FY 2023	FY 2024
<u>Cost – DCI New Coverage Mandate – possible reimbursement (§376.1228) p. 7-9</u>	<u>(Could exceed \$1,200,000)</u>	<u>(Could exceed \$1,200,000)</u>	<u>(Could exceed \$1,200,000)</u>
ESTIMATED NET EFFECT TO THE GENERAL REVENUE FUND	<u>(Could exceed \$1,682,055)</u>	<u>(Could exceed \$1,724,031)</u>	<u>(Could exceed \$1,732,192)</u>
Estimated Net FTE Change on the General Revenue Fund	4 FTE	4 FTE	4 FTE

BOARD OF PHARMACY FUND (0637)			
<u>Cost</u> – DCI §338.710 Renewed sunset date from 2019 to 2026 for the RX Cares for Missouri Program p. 6-7	<u>(Less than \$300,000)</u>	<u>(Less than \$300,000)</u>	<u>(Less than \$300,000)</u>
ESTIMATED NET EFFECT TO THE BOARD OF PHARMACY FUND (0637)	<u>(Less than \$300,000)</u>	<u>(Less than \$300,000)</u>	<u>(Less than \$300,000)</u>

<u>FISCAL IMPACT – Local Government</u>	FY 2022 (6 Mo.)	FY 2023	FY 2024
LOCAL POLITICAL SUBDIVISIONS			
<u>Reimbursement</u> – from the state for new health insurance coverage mandate (§376.1228) p. 7-9	\$0 to Unknown	\$0 to Unknown	\$0 to Unknown
<u>Costs</u> – County or City Jails (§221.065) Healthcare products expense p. 5	<u>\$0 or (Unknown)</u>	<u>\$0 or (Unknown)</u>	<u>\$0 or (Unknown)</u>
<u>Cost</u> – Potential additional insurance coverage (§376.1228) p. 7-9	<u>\$0 to (Unknown)</u>	<u>\$0 to (Unknown)</u>	<u>\$0 to (Unknown)</u>
ESTIMATED NET EFFECT TO LOCAL POLITICAL SUBDIVISIONS	<u>(Unknown)</u>	<u>(Unknown)</u>	<u>(Unknown)</u>

FISCAL IMPACT – Small Business

Small businesses that provide health insurance coverage could be impacted by this proposal.

Small business pharmacists could be impacted by this proposal.

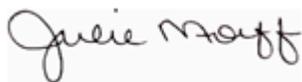
FISCAL DESCRIPTION

This proposal modifies provisions relating to health care.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Department of Commerce and Insurance
Department of Public Safety - Missouri Highway Patrol
Department of Social Services
Missouri Department of Conservation
Missouri Department of Transportation
Office of Administration
Missouri Consolidated Health Care Plan
Cities:
Claycomo
Corder
Hughesville
Kansas City
O'Fallon
Springfield
St. Louis Budget Division



Julie Morff
Director
April 28, 2021



Ross Strobe
Assistant Director
April 28, 2021