

HCS SS SB 608 -- MO HEALTHNET PROVIDER FEES

SPONSOR: Sater

COMMITTEE ACTION: Voted "Do Pass" by the Select Committee on Insurance by a vote of 8 to 0. Voted "Do Pass with HCS" by the Standing Committee on Health Insurance by a vote of 8 to 1.

The bill includes provisions relating to health care costs including the Health Care Cost and Transparency Act, MO HealthNet copayments, MO HealthNet missed appointment fees, and health care price transparency.

HEALTH CARE COST REDUCTION AND TRANSPARENCY ACT (Section 191.875, RSMo)

This bill establishes the Health Care Cost Reduction and Transparency Act that requires each health care provider licensed in Missouri to make available to the public and on its Internet website the most current price information required under these provisions in a manner that is easily understood by the public.

Beginning July 1, 2018, ambulatory surgical centers and imaging centers must provide an estimate of the current direct payment price information for the 25 most common reported health care services or procedures or 20 of the most common imaging procedures.

Beginning July 1, 2017, the bill requires hospitals to provide the amount that would be charged without discounts for each of the 100 most prevalent diagnosis-related groups as defined by the Medicare program.

Upon written request of a patient for the direct payment cost of a particular health care service or procedure, imaging procedure, or surgery procedure reported under these provisions, a health care provider or facility must provide the information to the patient in writing, either electronically or by mail, within three business days after receiving the request. Posting of such charges on the health care provider's or facility's website will constitute compliance with these provisions. It shall be a condition of participation in the MO HealthNet program for health care providers located in a Kansas border county to comply with these provisions. If such provider does not comply then a health care provider shall not include any provider located in a Missouri border county.

MO HEALTHNET COPAYMENTS (Section 208.142)

Beginning October 1, 2016, the Department of Social Services shall require MO HealthNet participants to pay an eight dollar co-payment

fee for use of a hospital emergency department for the treatment of a condition that is not an emergency medical condition.

The bill permits the Department of Social Services to utilize best clinical practices to achieve cost efficacy when administering the MO HealthNet pharmacy program.

PROPOSERS: Supporters say that the bill requires transparency in health care costs. Hospitals would be required to provide pricing for most common medical procedures which would help patients to know the costs going into a procedure. Many Medicaid patients use the emergency room for their primary care, this bill would allow for a co-payment to be charged if it is determined that the procedure was non-emergency. The Department of Social Services may utilize best clinical practices to achieve cost efficacy when administering the MO HealthNet pharmacy program.

Testifying for the bill were Senator Sater; Missouri College Of Emergency Physicians; and the St. Louis Area Business Health Coalition.

OPPOSERS: Those who oppose the bill say that some hospitals already provide this transparency information and that they should be exempt from the requirements of the bill since they already provide this function. Also children should not be included in this because they need to get rides from their caregiver and can't be held accountable.

Testifying against the bill were Anthem Blue Cross Blue Shield of Missouri; Missouri Health Care For All; Joan Bray, Consumers Council Of Missouri; Empower Missouri; Blue Cross Blue Shield of Kansas City, Missouri Insurance Coalition; Missouri Hospital Association; and Sidney Watson.