

FIRST REGULAR SESSION

[PERFECTED]

HOUSE COMMITTEE SUBSTITUTE FOR

HOUSE BILL NO. 780

99TH GENERAL ASSEMBLY

1700H.03P

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to health insurance, with an emergency clause.

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

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be known as section 376.2060, to read as follows:

376.2060. 1. The legislature finds that the Patient Protection and Affordable Care Act encourages states to develop innovative approaches to insuring their populations by authorizing states to apply for waivers from certain requirements of the act. To be eligible, a state must demonstrate that its proposed health insurance reforms are as comprehensive and affordable as the federal requirements for insurance sold in its state. In addition, proposed reforms must be budget neutral for the federal government. States that are granted innovation waivers may receive federal assistance to operate their reform programs in an amount that is equivalent to the aggregate amount of tax credits and cost-sharing subsidies that the federal government would have paid for individuals enrolled in the state. The legislature believes that the Affordable Care Act did not accomplish the intended result of providing affordable care for residents of the state as a whole and believes the state may be able to create a more effective alternative solution for providing affordable health coverage to individuals. The purpose of this act is to establish a state innovation waiver task force to develop a health care reform plan that meets requirements for obtaining a state innovation waiver.

2. (1) There is created the “State Innovation Waiver Task Force”, to be attached to the office of the governor for administrative purposes.

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 **(2) The task force shall consist of the following members or their respective**
19 **designees:**

20 **(a) A health care transformation coordinator, who shall be appointed by the**
21 **governor and shall serve as chair;**

22 **(b) The director of the department of insurance, financial institutions and**
23 **professional registration;**

24 **(c) The director of the department of social services;**

25 **(d) The director of the department of labor and industrial relations;**

26 **(e) The attorney general;**

27 **(f) The speaker of the house of representatives;**

28 **(g) The president pro tempore of the senate;**

29 **(h) The executive director of the Missouri consolidated health care plan;**

30 **(i) One person with expertise in health care delivery to be designated by the**
31 **president pro tempore of the senate;**

32 **(j) One person with expertise in health insurance to be designated by the president**
33 **pro tempore of the senate;**

34 **(k) One person with expertise in health care delivery to be designated by the**
35 **speaker of the house of representatives;**

36 **(l) One person with expertise in health insurance to be designated by the speaker**
37 **of the house of representatives; and**

38 **(m) One person who is a consumer advocate with a commitment to representing the**
39 **consumer interest in insurance regulation to be designated by the speaker of the house of**
40 **representatives.**

41 **(3) The task force shall:**

42 **(a) Examine the feasibility of alternative approaches to the health reform**
43 **requirements described under section 1332(a)(2) of the federal act;**

44 **(b) Examine alternatives to and possible exemptions or waivers from requirements**
45 **relating to allowable premium rate variations based upon age, as described in section 1201**
46 **of the federal act; and**

47 **(c) Develop a plan for applying for a state innovation waiver that meets the**
48 **requirements of section 1332 of the federal act, including:**

49 **a. Developing a strategy for health care reform that:**

50 **(i) Provides coverage that is at least as comprehensive as required by the federal**
51 **act;**

52 **(ii) Provides coverage and cost-sharing protections that are at least as affordable**
53 **as under the federal act;**

- 54 **(iii) Makes health insurance coverage available to as many residents of Missouri**
55 **as under the federal act; and**
- 56 **(iv) Is budget neutral for the federal government;**
- 57 **b. Examining the feasibility of options for providing affordable insurance coverage**
58 **for uninsured and underinsured individuals in Missouri that include innovations to the**
59 **state's existing Medicaid program; and**
- 60 **c. Ensuring compliance with all applicable public notice requirements of 31 CFR**
61 **33 and 45 CFR 155, as amended.**
- 62 **(4) The task force shall prepare a draft application for a state innovation waiver,**
63 **to take effect for plan years beginning on or after January 1, 2018.**
- 64 **(5) The members of the task force shall serve without compensation but shall be**
65 **reimbursed for expenses, including travel expenses, necessary for the performance of their**
66 **duties.**
- 67 **(6) The task force shall submit a report of its findings and recommendations to the**
68 **legislature, including any proposed legislation and the draft application, no later than**
69 **twenty days prior to the convening of the veto session of 2017.**
- 70 **(7) The task force shall be dissolved on December 31, 2017.**
- 71 **(8) For the purposes of this section, "federal act" means the Patient Protection and**
72 **Affordable Care Act (Public Law 111-148), as amended, and any regulations adopted**
73 **thereunder.**
- 74 **3. If provisions of the federal act are repealed or replaced the task force created**
75 **under the provisions of this section shall remain in force to continue developing innovative**
76 **approaches to providing comprehensive and affordable health coverage to residents of the**
77 **state.**

Section B. Because immediate action is necessary to examine alternatives to and possible
2 exemptions or waivers from the federal requirements of the Patient Protection and Affordable
3 Care Act (Public Law 111-148), as amended, and any regulations adopted thereunder, the
4 enactment of section 376.2060 of section A of this act is deemed necessary for the immediate
5 preservation of the public health, welfare, peace, and safety, and is hereby declared to be an
6 emergency act within the meaning of the constitution, and the enactment of section 376.2060 of
7 section A of this act shall be in full force and effect upon its passage and approval.

✓