

FIRST REGULAR SESSION

HOUSE BILL NO. 179

91ST GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES THOMPSON (Sponsor), BOUCHER AND DOLAN.

Pre-filed December 18, 2000, and 1000 copies ordered printed.

ANNE C. WALKER, Chief Clerk

0538L.01I

AN ACT

To amend chapter 376, RSMo, relating to health insurance by adding thereto one new section relating to the same subject.

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
2 known as section 376.1222, to read as follows:

**376.1222. 1. Each policy issued by an entity offering individual and group health
2 insurance which provides coverage on an expense-incurred basis, individual and group
3 health service or indemnity type contracts issued by a nonprofit corporation, individual
4 and group service contracts issued by a health maintenance organization, all self-insured
5 group health arrangements to the extent not preempted by federal law, and all health care
6 plans provided by managed health care delivery entities of any type or description, that are
7 delivered, issued for delivery, continued or renewed in this state on or after January 1,
8 2002, shall provide coverage for expenses for scalp hair prostheses worn for hair loss
9 suffered as a result of alopecia areata or alopecia totalis.**

10 **2. For purposes of this section, the following terms mean:**

11 **(1) "Prostheses", artificial appliances used to replace lost natural structures;**

12 **(2) "Scalp hair prostheses", artificial substitutes for scalp hair that are made
13 specifically for a particular individual.**

14 **3. The health care service required by this section shall not be subject to any
15 greater deductible or co-payment than other similar health care services provided by the
16 policy, contract or plan.**

17 **4. This section shall not apply to a supplemental insurance policy, including a life
18 care contract, accident-only policy, specified disease policy, hospital policy providing a**

- 19 **fixed daily benefit only, Medicare supplement policy, long-term care policy, or any other**
20 **supplemental policy as determined by the director of the department of insurance.**