

SECOND REGULAR SESSION

HOUSE BILL NO. 1747

93RD GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE SCHAAF.

Read 1st time February 13, 2006 and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

5153L.01I

AN ACT

To repeal section 374.184, RSMo, and to enact in lieu thereof one new section relating to standardized insurance forms.

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

Section A. Section 374.184, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 374.184, to read as follows:

374.184. 1. The director of the department of insurance shall prescribe by rule, after due consultation with providers of health care or treatment and their respective licensing boards, accident and sickness insurers, health services corporations and health maintenance organizations, and after a public hearing[.]:

(1) Uniform claim forms for reporting by health care providers. Such prescribed forms shall include but need not be limited to information regarding the medical diagnosis, treatment and prognosis of the patient, together with the details of charges incident to the providing of such care, treatment or services, sufficient for the purpose of meeting the proof requirements of an accident and sickness insurance or hospital, medical or dental services contract. Such prescribed forms shall be based upon the UB-82 form, with respect to hospital claims, and the HCFA 1500 form, with respect to physician claims, as such forms are modified or amended from time to time by the National Uniform Billing Committee or the federal Health Care Financing Administration; and

(2) Uniform application forms.

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.

15 2. The adoption of any uniform claim forms **or uniform application forms** by the
16 director pursuant to this section shall not preclude an insurer, health services corporation, or
17 health maintenance organization from requesting any necessary additional information in
18 connection with a claims investigation from the claimant, provider of health care or treatment,
19 or certifier of coverage, **or in connection with an application for insurance from the**
20 **applicant.** The provisions of this section shall not be deemed or construed to apply to electronic
21 claims submission. Insurers and providers may by contract provide for modifications to the
22 uniform billing document where both insurers and providers feel that such modifications
23 streamline claims processing procedures relating to the claims of the insurer involved in such
24 contract modification. However, a refusal by the provider to agree to modification of the
25 uniform billing format shall not be used by the insurer as grounds for refusing to enter into a
26 contract with the provider for reimbursement or payment for health services rendered to an
27 insured of the insurer.

28 3. Rules adopted or promulgated pursuant to this act shall be subject to notice and
29 hearing as provided in chapter 536, RSMo. The regulations so adopted shall specify an effective
30 date, which shall not be less than one hundred eighty days after the date of adoption, after which
31 no accident and sickness insurer, health services corporation or health maintenance organization
32 shall require providers of health care or treatment to complete forms differing from those
33 prescribed by the director pursuant to this section, [and] after which no health care provider shall
34 submit claims except upon such prescribed forms; provided that the provisions of this section
35 shall not preclude the use by any insurer, health services corporation or health maintenance
36 organization of the UB-82 form or the HCFA 1500 form, **and after which no insurer shall**
37 **require applicants for insurance coverage to complete forms differing from those**
38 **prescribed by the director under this section.**

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