

HOUSE BILL NO. 676

96TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES WELLS (Sponsor), POLLOCK, FRAKER, AULL, HUMMEL, McDONALD, OXFORD, CONWAY (27), DENISON, HODGES, FALLERT, CASEY, SCHIEFFER, ATKINS, MONTECILLO, McGEOGHEGAN, RIZZO, COLONA, JONES (63), TALBOY, SPRENG, CARLSON, HARRIS, WALTON GRAY, ANDERS, HUBBARD, PACE, WEBBER, CURLS, WEBB, STILL, McNEIL, NEWMAN, SHIVELY, HOUGHTON, SMITH (71), TAYLOR, QUINN, HAMPTON, WRIGHT, NANCE, REDMON, PETERS-BAKER, KRATKY, BLACK, ELLINGER AND McMANUS (Co-sponsors).

1660L.011

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to prescription eye drop refills.

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 376.1235, to read as follows:

376.1235. 1. Each health carrier or health benefit plan that offers or issues health benefit plans which are delivered, issued for delivery, continued, or renewed in this state on or after January 1, 2012, shall not deny coverage for a renewal of prescription eye drops when:

(1) The renewal is requested by the insured less than thirty days from the later of:

(a) The original prescription was distributed to the insured; or

(b) The date the last renewal of such prescription was distributed to the insured;

and

(2) The prescribing health care professional indicates on the original prescription that additional quantities are needed and the renewal requested by the insured does not exceed the number of additional quantities needed.

2. For the purposes of this section, "health carrier" and "health benefit plan" shall have the same meaning as defined in section 376.1350.

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.

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

17 **4. The provisions of this section shall not apply to a supplemental insurance policy,**
18 **including a life care contract, accident-only policy, specified disease policy, hospital policy**
19 **providing a fixed daily benefit only, Medicare supplement policy, long-term care policy,**
20 **short-term major medical policies of six months' or less duration, or any other**
21 **supplemental policy as determined by the director of the department of insurance,**
22 **financial institutions and professional registration.**

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