



Governmental Services Group

This week the Missouri legislature took up the controversial topic of initiative petition (IP) reform, perfecting Sen. Mary Elizabeth Coleman's HJR 74 after an all-night filibuster that began Monday evening and ended Tuesday afternoon. Sen. Cierpiot amended the bill on the floor that removed the "ballot candy" incentives within the bill that would make it more likely to pass in a statewide vote. This became necessary to get around the filibuster initiated by 10 Democrat Senators that was likely to doom any progress in the chamber. Still, there is a vocal minority of Freedom Caucus members that want the ballot candy language to remain in order to nullify any pro-choice IP similar to other states.

The Senate passed the bill Thursday after a short debate in which Freedom Caucus members talked about their disapproval of changes, and Sen. Hoskins and Pro Tem Rowden had a testy exchange during announcements at the end of the day's business.

On the House side, there was as expected, heated debate over both IP reform and gun violence in the wake of the Kansas City Super Bowl LVIII parade shooting in which many legislators were present. Multiple versions of gun restriction language have been filed by Democrats largely to put Republican majority members on record with floor amendment votes. This is likely to be a major topic as the session continues.

Additionally, candidate filing opens Tuesday, February 27th. Sen. Hough announced today that he is running for Lieutenant Governor and it is expected to see a more finalized list of statewide candidates shortly. We will continue to keep you updated on the latest in Jefferson City.

Payments for Prescription Drugs

SB 1035 (Beck) and SB 978 (Trent) enact provisions relating to payments for prescription drugs. Under this act, no health carrier or pharmacy benefits manager (PBM) shall discriminate against a federally qualified health center (FQHC) or a specified pharmacy, as such term is defined in the act, by:

- Reimbursing a FQHC or specified pharmacy for a quantity of a 340B drug, as defined in the act, in an amount less than the carrier or PBM would pay to any other similarly situated pharmacy for such quantity of the drug on the basis that the entity or pharmacy is a FQHC or specified pharmacy, or that the entity or pharmacy dispenses 340B drugs.
- Imposing any terms or conditions on FQHCs or specified pharmacies which differ from the terms or conditions applicable to other similarly situated pharmacies on the basis that the entity or pharmacy is a FQHC or specified pharmacy or dispenses 340B drugs, including but not limited to certain terms and conditions described in the act.

- Interfering with an individual's choice to receive a 340B drug from a FQHC or specified pharmacy.
- Requiring a FQHC or specified pharmacy to identify 340B drugs, either directly or through a third party or
- Refusing to contract with a FQHC or specified pharmacy for reasons other than those that apply equally to entities or pharmacies that are not FQHCs or specified pharmacies, or on the basis that the entity or pharmacy is a FQHC or specified pharmacy, or on the basis that the entity or pharmacy is described as a FQHC under provisions of federal law.

The Director of the Department of Commerce and Insurance shall impose a civil penalty on any PBM violating certain provisions of the act, not to exceed \$5,000 per violation per day.

Both bills had a public hearing in the Senate Insurance and Banking Committee this week. Testifying in support was Jordan Valley Health Center. In opposition was the Missouri Hospital Association and PCMA. Blue Cross Blue Shield and Missouri Insurance Coalition testified for informational purposes.

Hospital Price Transparency

HB 1837, sponsored by Representative McMullen, prohibits a hospital, or a person or entity collecting on behalf of the hospital, from initiating or pursuing collection actions against a patient or patient guarantor, for debt incurred by the patient on a date or dates of service when the hospital was not in material compliance with federal hospital price transparency laws.

If a patient believes that a hospital was not in material compliance with price transparency laws, the patient or patient guarantor may file a lawsuit. If a judge or jury finds the hospital out of material compliance with federal hospital price transparency laws, the hospital:

(1) Is subject to a penalty equal to the amount of the debt; (2) Must refund any amount paid on the debt; (3) Must dismiss any court action initiated by the hospital; (4) Pay attorney fees and costs the patient or patient guarantor incurred relating to the action; and (5) Must remove any report made to a consumer reporting agency relating to the debt from the patient's or guarantor's credit report.

Nothing in the bill: (1) Prohibits a hospital from billing a patient, patient's guarantor, or third-party payer, including a health insurer, for items or services provided to the patient; or (2) Requires a hospital to refund a payment made to the hospital for items or services provided to a patient, so long as no collection action is taken in violation of this bill.

Additionally, any patient who pays a bill received from the hospital that charges the patient for items or services in an amount that exceeds the actual costs thereof may bring a civil action in circuit court against the hospital and recover the difference between what had been paid by the patient and the actual cost of the items or services.

This bill had a hearing in the House General Laws Committee this week.

In support of the bill was STL Area Business Health Coalition, Show Me Institute, American Action Fund, Cicero Action, Missouri Century Foundation, and several citizens.

In opposition to the bill was Mosaic Life Care, BJC, St. Luke's, University of Missouri Healthcare, Missouri Hospital Association, and Mercy.

Tobacco Products

HB 1484, sponsored by Representative Christ, establishes that no political subdivision shall deny a qualified applicant for a tobacco products license, an alternative nicotine products license, or a vapor products license if the new license is for the same business or location that had a tobacco products license, an alternative nicotine products license, or a vapor products license within the previous 24 months, as described in the bill.

Additionally, any new licensee shall remain eligible for a tobacco products license, an alternative nicotine products license, or a vapor products license, or the renewal thereof, provided that such licensee complies with applicable rules and laws.

The bill changes the minimum age to purchase tobacco products, alternative nicotine products, and vapor products from 18 years of age to 21 years of age.

The Division of Alcohol and Tobacco within the Department of Public Safety is currently allowed to employ a person 17 years of age, with parental consent, to attempt to purchase tobacco for the purpose of inspection or enforcement of tobacco laws. This bill changes the age to 16 years of age and under 21 years of age.

This bill was voted out of Committee DO PASS.

Public Funding Abortion Facilities

HB 2634, sponsored by Representative Smith, modifies provisions relating to public funding of abortion facilities and affiliates and provisions relating to MO HealthNet providers. This bill was voted out of the House Rules Committee DO PASS.

DEI

HB 2619, sponsored by Representative Smith (163), prohibits funds from any state department be used for intradepartmental programs, staffing, or initiatives related to "diversity, equity, and inclusion" or similar initiatives that promote preferential treatment based on certain characteristics, concepts such as oppression as the sole cause of disparities, collective guilt ideologies, intersectional or divisive identity activism, and the limiting of freedom of conscience, thought, or speech.

This bill also specifies that State departments are not prohibited from following Federal and State employment and antidiscrimination laws or complying with the Americans with Disabilities Act.

This bill prohibits State departments from mandating, requiring, or incentivizing private sector employers to implement "diversity, equity, and inclusion" programs or initiatives as a condition for receiving a state contract.

This bill was voted out of the House General Laws Committee DO PASS.

Financial Transactions

HB 2087, sponsored by Representative O'Donnell, modifies provisions relating to financial transactions.

Current law requires that if a health carrier initiates or changes the method used to reimburse a health care provider to a method that requires the provider to pay a fee or remit some other form of remuneration, the carrier must notify the provider of the cost, provide clear instructions as to how to select an alternative payment method, and use that alternative method if requested by the provider.

This bill requires the health carrier or entity acting on its behalf to first receive approval from the health care provider before reimbursing the health care provider with such payment method.

If a health carrier is currently reimbursing a health care provider with a payment method, the health care provider can send one notice to the health carrier for all the health care provider's patients covered by such health carrier stating that the health care provider declines to be reimbursed with a payment method.

The notice will remain in effect for the duration of the contract unless the health care provider requests otherwise. All payments made by the health carrier to the health care provider after receipt of the notice declining to be reimbursed with a payment method cannot require the health care provider to pay a fee, discount the amount of the provider's claim for reimbursement, or remit any other form of remuneration in order to redeem the amount of the provider's claim for reimbursement.

This bill was voted out of the House Financial Institutions Committee DO PASS.

Sewage Disposal

HB 2083, sponsored by Representative Keathley, modifies provisions relating to sewage disposal. his bill was voted out of the House Local Government Committee DO PASS.

Link to Bill Summary:

<https://documents.house.mo.gov/billtracking/bills241/sumpdf/HB2083I.pdf>

Licensure Requirements

SB 1030, sponsored by Senator Eslinger, requires a candidate applying for licensure as a physician to submit to a criminal background check and furnish certain educational and experience documents. This act also allows the Board of Registration for the Healing Arts (the "Board") to require applicants to list all licenses to practice as a physician currently or previously held in another state, territory, or country and to disclose any past or pending investigations, discipline, or sanctions for such licenses. The Board may also obtain a report on the on the

applicant from the National Practitioner Data Bank. Furthermore, this act provides that if the Board does not approve or deny an application for licensure as a physician within forty-five days from the date of receipt, the application shall be deemed approved, and the candidate shall be considered licensed.

Finally, this act specifies that an applicant who has completed an unaccredited postgraduate training in a medical subspecialty for which there isn't a program accredited by the Accreditation Council for Graduate Medical Education ("ACGME") shall satisfy the training requirements for permanent licensure as required by state rules if such training occurred in a teaching hospital accredited by ACGME. The Board shall waive such training requirements for any applicant who has been a licensed physician in good standing in another state for more than three years.

This bill had a hearing in the Senate Government Accountability Hearing this week.

MHA was in support of the bill.