

SECOND REGULAR SESSION
HOUSE COMMITTEE SUBSTITUTE FOR
HOUSE BILL NO. 1697
100TH GENERAL ASSEMBLY

4132H.03C

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal section 376.1345, RSMo, and to enact in lieu thereof one new section relating to overpayment of health insurance claims.

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

Section A. Section 376.1345, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 376.1345, to read as follows:

376.1345. 1. As used in this section, unless the context clearly indicates otherwise, terms shall have the same meaning as ascribed to them in section 376.1350.

2. No health carrier, nor any entity acting on behalf of a health carrier, shall restrict methods of reimbursement to health care providers for health care services to a reimbursement method requiring the provider to pay a fee, discount the amount of their claim for reimbursement, or remit any other form of remuneration in order to redeem the amount of their claim for reimbursement.

3. If a health carrier initiates or changes the method used to reimburse a health care provider to a method of reimbursement that will require the health care provider to pay a fee, discount the amount of its claim for reimbursement, or remit any other form of remuneration to the health carrier or any entity acting on behalf of the health carrier in order to redeem the amount of its claim for reimbursement, the health carrier or an entity acting on its behalf shall:

(1) Notify such health care provider of the fee, discount, or other remuneration required to receive reimbursement through the new or different reimbursement method; and

(2) In such notice, provide clear instructions to the health care provider as to how to select an alternative payment method, and upon request such alternative payment method shall be used to reimburse the provider until the provider requests otherwise.

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 4. A health carrier shall allow the provider to select to be reimbursed by an electronic
19 funds transfer through the Automated Clearing House Network as required pursuant to 45 C.F.R.
20 Sections 162.925, 162.1601, and 162.1602, and if the provider makes such selection, the health
21 carrier shall use such reimbursement method to reimburse the provider until the provider requests
22 otherwise.

23 5. **A health carrier may only withhold or recoup an amount it overpaid to a**
24 **provider from the provider or entity in receipt of the payment for the claim. A withhold**
25 **or recoupment by a health carrier shall also inform the provider or entity in receipt of the**
26 **payment of the claim, the health service provided, date of service, and patient for whom**
27 **the withhold or recoupment is being made.**

28 6. Violation of this section shall be deemed an unfair trade practice under sections
29 375.930 to 375.948.

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