

Title 22—MISSOURI CONSOLIDATED HEALTH CARE PLAN
Division 10—Health Care Plan
Chapter 3—Public Entity Membership

PROPOSED AMENDMENT

22 CSR 10-3.030 Public Entity Membership Agreement and Participation Period The Missouri Consolidated Health Care Plan is amending section (1).

PURPOSE: *This amendment revises participation and contribution requirements for dental coverage.*

(1) The participation agreement, these rules, and applicable provisions of law constitute the membership agreement between a public entity and the Missouri Consolidated Health Care Plan (MCHCP).

(A) By applying for coverage under MCHCP, a public entity agrees that—

1. A public entity must make health care coverage available to all eligible employees, their dependents, former employees entitled to a future retirement benefit, and retirees;

2. MCHCP will be the only health care offering made to its eligible members;

3. The public entity shall contribute at least fifty percent (50%) of the lowest-cost employee-only premium per month toward each active employee's premium for the plan(s) offered through MCHCP. There is no contribution requirement for dependents or retirees;

4. *[The public entity shall contribute at least fifty percent (50%) toward the employee-only dental premium per month. One hundred percent (100%) of the employees enrolled in the medical plan and fifty percent (50%) of dependents enrolled in the medical plan must participate in the dental plan. The number of employees enrolled in the dental plan must be equal to or exceed the number in the medical plan, but the same employees do not have to be enrolled in both plans;]*

There are no participation or contribution requirements for dental coverage;

5. There are no participation or contribution requirements for vision coverage;

6. The Employee Assistance Program is paid by the employer and requires one hundred percent (100%) participation of employees eligible for medical coverage and can be expanded to additional classifications;

7. For public entities with fewer than twenty-five (25) employees, the public entity shall only offer one (1) MCHCP medical plan choice to its employees. For public entities with twenty-five (25) or more employees, the public entity may offer two (2) MCHCP medical plan choices;

8. For public entities with more than a total of three (3) employees, at least seventy-five percent (75%) of all eligible employees must enroll in MCHCP. If an employee declines coverage, s/he must submit a form stating coverage is waived. If the employee is waiving coverage because s/he is covered under another group health plan, Medicare or Medicaid, the employee must submit proof of other coverage. An employee with other group coverage, Medicare, or Medicaid is exempt from the seventy-five percent (75%) enrollment participation requirement. A participation audit will be conducted annually to ensure the participation requirement is met;

9. Any individual eligible as an employee may be covered as either an employee or dependent, but not both. Employees enrolled as dependents will not be considered as eligible employees;

10. A public entity may apply a probationary period, not to exceed applicable federal guidelines, before benefits become effective; and

11. A public entity must notify MCHCP of a member's termination within thirty (30) days of the termination.

AUTHORITY: section 103.059, RSMo 2000. Emergency rule filed Dec. 20, 2004, effective Jan. 1, 2005, expired June 29, 2005. Original rule filed Dec. 20, 2004, effective June 30, 2005. Emergency amendment filed Dec. 22, 2008, effective Jan. 1, 2009, expired June 29, 2009. Amended: Filed Dec. 22, 2008, effective June 30, 2009. Emergency amendment filed Dec. 22, 2009, effective Jan. 1, 2010, expired June 29, 2010. Amended: Filed Jan. 4, 2010, effective June 30, 2010. Amended: Filed Nov. 1, 2011, effective May 30, 2012. Amended: Filed Oct. 30, 2012, effective May 30, 2013. Emergency amendment filed Oct. 26, 2020, effective Jan. 1, 2021, expires June 29, 2021. Amended: filed Oct. 26, 2020.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Consolidated Health Care Plan, Judith Muck, PO Box 104355, Jefferson City, MO 65110. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

*Original authority: 103.059, RSMo 1992.