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

EMERGENCY AMENDMENT

22 CSR 10-3.030 Public Entity Membership Agreement and Participation Period.

The Missouri Consolidated Health Care Plan is amending subsection (1)(A) and renumbering as necessary.

PURPOSE: This amendment revises the requirements for public entity plan offerings and adds requirements for applying accumulated deductible and out-of-pocket maximum amounts for public entities who join the plan after the first day of the calendar year.

*EMERGENCY STATEMENT: This emergency amendment must be in place by January 1, 2027, in accordance with the new plan year. Therefore, this emergency amendment is necessary to serve a compelling governmental interest of protecting members (public entity employee members, retirees, and their families) enrolled in the Missouri Consolidated Health Care Plan (MCHCP) from the unintended consequences of confusion regarding eligibility or availability of benefits and will allow members to take advantage of opportunities for reduced premiums for more affordable options without which they may forego coverage. Further, it clarifies member eligibility and responsibility for various types of eligible charges, beginning with the first day of coverage for the new plan year. It may also help ensure that inappropriate claims are not made against the state and help protect the MCHCP and its members from being subjected to unexpected and significant financial liability and/or litigation. It is imperative that this amendment be filed as an emergency amendment to maintain the integrity of the current health care plan. This emergency amendment fulfills the compelling governmental interest of offering access to more convenient and affordable medical services to public entity employee members, retirees, and their families as one (1) method of protecting the MCHCP trust fund from more costly expenses. This emergency amendment reflects changes made to the plan by the Missouri Consolidated Health Care Plan Board of Trustees. A proposed amendment, which covers the same material, will be published in the December 15, 2026, issue of the **Missouri Register**. This emergency amendment complies with the protections extended by the **Missouri** and **United States Constitutions** and limits its scope to the circumstances creating the emergency. The MCHCP follows procedures best calculated to assure fairness to all interested persons and parties under the circumstances. This emergency amendment was filed November 16, 2026 becomes effective January 1, 2027 and expires June 29, 2027.*

(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]* **medical plan** offering made to its eligible members;

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

3. A public entity may elect to offer dental and/or vision coverage, but only if the public entity offers MCHCP medical coverage. Dental and/or vision coverage shall not be offered on a standalone basis.

*[4.]***A.** There are no participation or contribution requirements for dental coverage;

*[5.]***B.** There are no participation or contribution requirements for vision coverage;

*[6.]***4.** 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.]***5.** For public entities with **ten (10) or** fewer *[than twenty-five (25)]* employees, the public entity shall *[only]* offer **a maximum of** *[one (1)]* **two (2)** MCHCP medical plan**s** *[choice]* to its employees. For public entities with *[twenty-five (25)]* **eleven (11)** or more employees, the public entity may offer *[two (2)]* **up to the maximum number of** MCHCP medical plan**s** *[choices]* **available to public entities**;

6. If a public entity joins MCHCP after the first day of the calendar year as a replacement or continuation of a prior group health plan sponsored by the public entity, accumulated deductible and out-of-pocket maximum amounts incurred by an employee or enrolled dependent(s) during the same calendar year may be credited by the medical plan vendor toward the corresponding individual or family deductible and out-of-pocket maximum under the employee's MCHCP medical plan. Documentation of applicable deductible or out-of-pocket maximum expenses from the employee's prior group health plan is required and shall be submitted within sixty (60) days of the effective date of coverage of the MCHCP plan. Credit shall not be given by the medical plan vendor for such expenses for which no documentation is submitted.

*[8.]***7.** 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]* **may** be conducted annually to ensure the participation requirement is met;

*[9.]***8.** 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.]***9.** A public entity may apply a probationary period, not to exceed applicable federal guidelines, before benefits become effective; and

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

AUTHORITY: section 103.059, RSMo 2016. Emergency rule filed Dec. 20, 2004, effective Jan. 1, 2005, expired June 29, 2005. Original rule filed Dec. 20, 2004, effective June 30, 2005. For intervening history, please consult the ***Code of State Regulations****. Emergency amendment filed Nov. 16, 2026, effective Jan. 1, 2027, expires June 29, 2027. An emergency and a proposed amendment covering this*

same material will be published in the December 15, 2026, issue of the ***Missouri Register****.*

PUBLIC COST: This emergency amendment will not cost state agencies or political subdivisions more than five hundred dollars ($500) in the time the emergency is in effect.

PRIVATE COST: This emergency amendment will not cost private entities more than five hundred dollars ($500) in the time the emergency is in effect.