# Rules of Missouri Consolidated Health Care Plan

## Division 10—Health Care Plan

### Chapter 1—General Organization

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PURPOSE: This rule establishes the policy of the board of trustees regarding the general organization of the Missouri Consolidated Health Care Plan.

(1) The Missouri Consolidated Health Care Plan becomes effective January 1, 1994, under an Act of the general assembly. The plan offers health care coverage for state employees, retirees and their dependents. It also provides this benefit as an option to all other public entities within the state, as long as they meet admission criteria that may be established by the board of trustees.

(2) The responsibility for the proper operation of the system and the direction of its policies is vested in a board of trustees. The administration of the detailed affairs of the system is in the charge of an executive director, aided by an assistant executive director.

(3) The assistant executive director shall perform duties as may be delegated to him/her by the executive director and in the absence or disability of the executive director shall perform the duties of the executive director.

(4) House Bill 1574 of the general assembly of Missouri authorized the establishment of the plan. The statutory provisions relating to the establishment and operation of the plan of medical care benefits is provided for in Chapter 103, RSMo. The rules in 22 CSR 10-2 relate to the plan document which delineates the terms of the plan established by the trustees of the Missouri Consolidated Health Care Plan in accordance with House Bill 1574 and in accordance with Chapter 103, RSMo.

(5) Anyone wishing to obtain information may do so by contacting the plan’s executive director at any of the following:
(A) 832 Weathered Rock Court, Jefferson City, MO 65101;
(B) PO Box 104355, Jefferson City, MO 65110;
(C) (573) 751-8881; or
(D) (800) 701-8881.

AUTHORITY: section 103.059, RSMo 2000.*