

Missouri 2019 End of Session Report

Home Modification Tax Credit

The National MS Society worked with Representative Fitzwater (HB 1060), Representative Roberts (HB 1013) and Senator Hoskins (SB 481) to introduce legislation that would reinstate the [Missouri Residential Dwelling Home Modification Tax Credit](#), which was set to expire at the end of 2019. This Tax Credit would provide up to a \$2,500 refundable income tax credit for a taxpayer that makes expenditures for the purpose of making all or any portion of their existing, principle dwelling accessible. The accessibility features promoted with this credit represents an evidence-based prevention strategy that has been shown to reduce the incidence of falls, which is a significant concern for people living with multiple sclerosis.

Ultimately, it was an amendment by Representative Roberts on tax bill (SB 87), that made it over the finish line and was delivered to Governor Parson and is awaiting his signature. If signed, the tax credit will continue to be available until December 31, 2025.

Medicaid Work Requirements (SB 76/HB 183)

The National MS Society opposed work requirements, which would entail in burdensome administrative requirements that could have serious consequences for people living with MS who receive care through Missouri HealthNet (Medicaid). If the state finds that individuals have failed to comply with the requirements, their health coverage could be terminated. Patients who are in the middle of treatment or who rely on regular visits with health care providers and daily medications to manage their chronic conditions cannot afford a sudden gap in their continuity of care. The MS Society submitted opposing testimony to this policy, and we are thankful to report that neither bill ultimately made its way off the floor calendars for passage.

Junk Insurance/Short-Term Limited Duration Plans (SB 48/HB 83)

The National MS Society is deeply concerned about the impact of allowing the expansion of short-term limited duration plans (STLDPs)/junk insurance plans will have on individuals living with MS and their families. While STLDPs can offer less costly coverage, they frequently do not adhere to important standards, including

coverage for pre-existing conditions, financial protections and coverage for essential health benefits. We are extremely concerned that the proposal will leave Missouri families with insufficient coverage, unpaid medical bills, and lifelong health implications – just as many of these plans did before the Affordable Care Act (ACA) was passed. That’s why The MS Society submitted testimony in opposition to this policy and we are pleased to report that the legislation did not pass!

Surprise Medical Billing (SB 514)

In April, MS Activists were pleased to hold an MS Action Day, joining with Missouri Health Care for All to advocate in favor of a technical fix for legislation that passed last session which provided some relief for emergency room surprise medical billing. The law requires insurers to pay providers for all emergency services “necessary to screen and stabilize an enrollee” and any additional services authorized by the insurer. Patients cannot be held liable for cost-sharing, that exceeds the terms under their insurance plans, even if the provider is out-of-network. We are pleased to report that this technical fix passed as part of SB 514 (Omnibus Health bill)!