



SENATE BILL 252: Dental Bill of Rights.

2019-2020 General Assembly

Committee:	Senate Health Care. If favorable, re-refer to Commerce and Insurance. If favorable, re-refer to Rules and Operations of the Senate	Date:	April 30, 2019
Introduced by:	Sen. J. Davis	Prepared by:	Jessica Boney Staff Attorney
Analysis of:	PCS to First Edition S252-CSBP-8		

OVERVIEW: *The Proposed Committee Substitute (PCS) for Senate Bill 252 would amend the methods of claims payment for dental services, add requirements for third party access to dental provider network contracts, and include dental plans for purposes of coverage determinations.*

BILL ANALYSIS:

Methods of Claims Payment. The PCS restricts the agreement between an insurer and a provider of dental services from accepting credit card payments as the only payment method for dental services.

Third Party Access to Dental Provider Network Contracts. The PCS defines provider network contract, insurer and third party. It allows an insurer to grant third party access to its provider network contract if (i) the insurer allows any provider who is part of the carrier's provider network to choose not to participate in third party access, (ii) the insurer identifies all third parties with granted access, and (iii) the accessing third party complies with the provider network contract terms.

Coverage Determinations. The PCS prohibits an insurer from subsequently retracting its coverage determination for a dental plan after the services or supplies have been provided. The PCS defines pretreatment estimate and clarifies it is not a coverage determination.

EFFECTIVE DATE: This act is effective January 1, 2020, and applies to health benefit contracts issued, renewed, or amended on or after that date.

Karen Cochrane-Brown
Director



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Legislative Analysis
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