

HB 2172 -- INSURANCE FOR DENTAL SERVICES

SPONSOR: Franklin

This bill prohibits a contracting entity from selling, assigning, or otherwise granting access to the dental services of a participating provider under a health care contract unless expressly authorized by the health care contract. The health care contract must specifically provide that one purpose of the contract is the selling, assigning, or giving the contracting entity rights to the services of the participating provider, including network plans.

Upon entering into a contract with a participating provider and upon request by a participating provider, a contracting entity must properly identify any third party that has been granted access to the dental services of the participating provider. Any contracts entered into or renewed on or after the effective date of these provisions must require that at any time a contracting entity sells, assigns, or otherwise grants access to the dental services of a participating provider, it must allow the participating provider the option to refuse to continue to provide services to third party entities that have purchased, been assigned, or otherwise been granted access to the dental services of a participating provider by the contracting entity.

A contracting entity that sells, assigns, or otherwise grants access to the dental services of a participating provider must maintain an Internet website or a toll-free telephone number through which the participating provider may obtain a listing, updated at least every 90 days, of the third parties that have been granted access to the participating provider's dental services. Any third party entity within 30 days of purchasing, being assigned, or otherwise accessing the dental services of a participating provider must provide to the participating provider a listing of the 100 most frequently reimbursed American Dental Association Current Dental Terminology codes by the third party entity and the amount by which the third party entity reimburses a participating provider.

A contracting entity that sells, assigns, or otherwise grants access to a participating provider's dental services must ensure that an explanation of benefits or remittance advice furnished to the participating provider that delivers dental services under the health care contract identifies the contractual source of any applicable discount. All third parties that have contracted with a contracting entity to purchase, be assigned, or otherwise be granted access to the participating provider's discounted rate must comply with the participating provider's contract including all

requirements to encourage access to the participating provider and pay the participating provider pursuant to the rates of payment and methodology set forth in that contract unless otherwise agreed to by a participating provider. A contracting entity is deemed in compliance with these provisions when the insured's identification card provides information which identifies the insurance carrier to be used to reimburse the participating provider for the covered dental services.