



BILL STATUS

1 SB296
2 165214-1
3 By Senator Bussman
4 RFD: Health and Human Services
5 First Read: 19-MAR-15



BILL STATUS

1 165214-1 : n : 03/04/2015 : FC / agb LRS2015-868

2

3

4

5

6

7

8 SYNOPSIS: Under existing law, health insurance
9 policies and health maintenance organization plans
10 offer coverage for certain dental services.

11 This bill would provide that certain health
12 insurance policies, health maintenance organization
13 plans, and other health benefit plans, which cover
14 dental services shall not require a dentist to
15 provide services to covered individuals at a fee
16 set by the plan or policy unless the services are
17 covered under the plan or policy. The bill would
18 not apply to health care service plans.

19

20 A BILL
21 TO BE ENTITLED
22 AN ACT

23

24 Relating to the terms of certain health insurance
25 policies, health maintenance organization plans, and other
26 health benefit plans, with respect to dental services; to
27 prohibit a policy or plan to set fees for services that are

1 not covered by the plan or policy; and to provide certain
2 exceptions.

3 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

4 Section 1. As used in this act, the following terms
5 shall have the following meanings:

6 (1) COVERED PERSON. Any individual, family, or
7 family member on whose behalf third-party payment or
8 prepayment of health or medical expenses is provided under an
9 insurance policy, plan, or contract providing for third-party
10 payment or prepayment of health care or medical expenses.

11 (2) DENTAL CARE PROVIDER. A licensed dentist.

12 (3) INSURANCE POLICY, PLAN, OR CONTRACT PROVIDING
13 FOR THIRD-PARTY PAYMENT OR PREPAYMENT OF HEALTH OR MEDICAL
14 EXPENSES. Includes an individual or group policy for accident
15 or health insurance, an individual or group hospital or health
16 care service contract, an individual or group health
17 maintenance organization contract, an organized delivery
18 system contract, a preferred provider organization contract,
19 and any other similar policy, plan, or contract.

20 Section 2. An insurance policy, plan, or contract
21 providing for third-party payment or prepayment of health or
22 medical expenses issued after January 1 following the
23 effective date of this act shall not require a dental care
24 provider to provide service to a covered person at a fee set
25 by the policy or plan unless the services are covered by the
26 policy or plan.



BILL STATUS

1 Section 3. Nothing in this act shall be construed as
2 limiting the ability of an insurer or a third-party
3 administrator to restrict any of the following as related to
4 covered services:

- 5 (1) Balance billing.
- 6 (2) Waiting periods.
- 7 (3) Frequency limitations.
- 8 (4) Deductibles.
- 9 (5) Maximum annual benefits.

10 Section 4. Nothing in this act shall apply to
11 corporations organized pursuant to Article 6 of Chapter 20 of
12 Title 10A, commencing at Section 10A-20-6.01, Code of Alabama
13 1975.

14 Section 5. This act shall become effective on the
15 first day of the third month following its passage and
16 approval by the Governor, or its otherwise becoming law.