

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

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4 ENGROSSED

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7 A BILL  
8 TO BE ENTITLED  
9 AN ACT

10  
11 Relating to the terms of certain health insurance  
12 policies, health maintenance organization plans, and other  
13 health benefit plans, with respect to dental services; to  
14 prohibit a policy or plan to set fees for services that are  
15 not covered by the plan or policy; and to provide certain  
16 exceptions.

17 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

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

20 (1) COVERED PERSON. Any individual, family, or  
21 family member on whose behalf third-party payment or  
22 prepayment of health or medical expenses is provided under an  
23 insurance policy, plan, or contract providing for third-party  
24 payment or prepayment of health care or medical expenses.

25 (2) COVERED SERVICES. Dental care services for which  
26 a reimbursement is available under an enrollee's plan  
27 contract, or for which a reimbursement would be available but

1 for the application of contractual limitations such as  
2 deductibles, copayments, coinsurance, waiting periods, annual  
3 or lifetime maximums, frequency limitations, alternative  
4 benefit payments, or any other limitation.

5 (3) DENTAL CARE PROVIDER. A licensed dentist.

6 (4) DENTAL PLAN. Includes any policy of insurance  
7 which is issued by a health care service contractor which  
8 provides for coverage of dental services not in connection  
9 with a medical plan.

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

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

25 Section 3. Nothing in this act shall be construed as  
26 limiting the ability of an insurer or a third-party

1 administrator to restrict any of the following as related to  
2 covered services:

3 (1) Balance billing.

4 (2) Waiting periods.

5 (3) Frequency limitations.

6 (4) Deductibles.

7 (5) Maximum annual benefits.

8 Section 4. Nothing in this act shall apply to  
9 corporations organized pursuant to Article 6 of Chapter 20 of  
10 Title 10A, commencing at Section 10A-20-6.01, Code of Alabama  
11 1975, or to policies, plans, or contracts entered, issued, or  
12 administered by the corporations.

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

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2  
3 Senate  
  
4 Read for the first time and referred to the Senate  
5 committee on Health and Human Services..... 19-MAR-15  
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7 Read for the second time and placed on the calen-  
8 dar 1 amendment..... 30-APR-15  
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10 Read for the third time and passed as amended .... 12-MAY-15  
  
11 Yeas 26  
12 Nays 1  
13 Abstaining 1  
  
14  
15  
16 Patrick Harris  
17 Secretary  
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