

By: Goldman

H.B. No. 2486

A BILL TO BE ENTITLED

AN ACT

relating to certain required disclosures and prohibited practices of certain employee benefit plans and health insurance policies that provide benefits for dental care services.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 1451.205, Insurance Code, is amended to read as follows:

Sec. 1451.205. DISCLOSURE OF BENEFIT TERMS. (a) An employee benefit plan or health insurance policy shall:

(1) if applicable, disclose that the benefit for dental care services offered is limited to the least costly treatment; and

(2) specify in dollars and cents the amount of the payment or reimbursement to be provided for dental care services or define and explain the standard on which payment of benefits or reimbursement for the cost of dental care services is based, such as:

(A) "usual and customary" fees;

(B) "reasonable and customary" fees;

(C) "usual, customary, and reasonable" fees; or

(D) words of similar meaning.

(b) A person or entity who provides or issues an employee benefit plan or health insurance policy or the employer or employee organization, if applicable, shall establish an Internet website to

1 provide resources and information to dentists, insureds,
2 participants, employees, and members.

3 (c) An employee benefit plan or health insurance policy
4 shall make accessible on the Internet website established under
5 Subsection (b) information about the plan or policy sufficient for
6 patients and dentists to determine the type of dental care services
7 covered by the plan or policy and the amount of the payment or
8 reimbursement available for those services under the plan or
9 policy. Access to the Internet website must be at no charge to
10 patients under the plan or policy and dentists providing dental
11 care services to the patients.

12 SECTION 2. Section 1451.206(a), Insurance Code, is amended
13 to read as follows:

14 (a) The employee benefit plan or health insurance policy
15 shall:

16 (1) provide:

17 (A) [~~(1)~~] that payment or reimbursement for a
18 noncontracting provider dentist shall be the same as payment or
19 reimbursement for a contracting provider dentist; [~~and~~]

20 (B) [~~(2)~~] that the party to or beneficiary of the
21 plan or policy may assign the right to payment or reimbursement to
22 the dentist who provides the dental care services; and

23 (C) one or more methods of payment or
24 reimbursement that provide the dentist 100 percent of the
25 contracted amount of the payment or reimbursement and that do not
26 require the dentist to incur a fee to access the payment or
27 reimbursement; and

1 (2) disclose on the Internet website required under
2 Section 1451.205 and on request of a dentist or a party to or
3 beneficiary of the plan or policy the fees, if any, associated with
4 the methods of payment or reimbursement available under the plan or
5 policy.

6 SECTION 3. Sections 1451.207(a) and (c), Insurance Code,
7 are amended to read as follows:

8 (a) An employee benefit plan or health insurance policy may
9 not:

10 (1) interfere with or prevent an individual who is a
11 party to or beneficiary of the plan or policy from selecting a
12 dentist of the individual's choice to provide a dental care service
13 the plan or policy offers if the dentist selected is licensed in
14 this state to provide the service;

15 (2) deny a dentist the right to participate as a
16 contracting provider under the plan or policy if the dentist is
17 licensed to provide the dental care services the plan or policy
18 offers;

19 (3) authorize a person to regulate, interfere with, or
20 intervene in the provision of dental care services a dentist
21 provides a patient, including diagnosis, if the dentist practices
22 within the scope of the dentist's license; ~~or~~

23 (4) require a dentist to make or obtain a dental x-ray
24 or other diagnostic aid in providing dental care services; or

25 (5) deduct the amount of an overpayment of a claim from
26 a payment or reimbursement of another claim unless both claims were
27 for dental services provided to the same patient by the same

1 dentist.

2 (c) This section does not prohibit the predetermination of
3 benefits for dental care expenses before the attending dentist
4 provides treatment. An employee benefit plan or health insurance
5 policy that provides a written predetermination of benefits to a
6 dentist with respect to a dental care service for a patient that
7 includes a specific benefit payment or reimbursement amount may not
8 pay or reimburse the dentist for providing that service to the
9 patient in an amount that is less than the amount set forth in the
10 predetermination.

11 SECTION 4. The changes in law made by this Act apply only to
12 an employee benefit plan or health insurance policy that provides
13 benefits for dental care services that is delivered, issued for
14 delivery, renewed, or contracted for on or after the effective date
15 of this Act. An employee benefit plan or health insurance policy
16 that provides benefits for dental care services that is delivered,
17 issued for delivery, renewed, or contracted for before the
18 effective date of this Act is governed by the law as it existed
19 immediately before the effective date of this Act, and that law is
20 continued in effect for that purpose.

21 SECTION 5. This Act takes effect September 1, 2019.