

By: Schwertner

S.B. No. 1550

A BILL TO BE ENTITLED

AN ACT

1  
2 relating to certain required disclosures and prohibited practices  
3 of certain employee benefit plans and health insurance policies  
4 that provide benefits for dental care services.

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

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

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

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

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

18 (A) "usual and customary" fees;

19 (B) "reasonable and customary" fees;

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

21 (D) words of similar meaning.

22 (b) A person or entity who provides or issues an employee  
23 benefit plan or health insurance policy or the employer or employee  
24 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.