By: Zaffirini S.B. No. 401

A BILL TO BE ENTITLED

| 1 | AN ACT |
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| 2 | relating to health benefit coverage for general anesthesia in |
| 3 | connection with certain pediatric dental services. |
| 4 | BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: |
| 5 | SECTION 1. Chapter 1367, Insurance Code, is amended by |
| 6 | adding Subchapter G to read as follows: |
| 7 | SUBCHAPTER G. PEDIATRIC DENTISTRY |
| 8 | Sec. 1367.301. APPLICABILITY OF SUBCHAPTER. (a) This |
| 9 | subchapter applies only to a health benefit plan that provides |
| 10 | benefits for medical or surgical expenses incurred as a result of a |
| 11 | health condition, accident, or sickness, including an individual, |
| 12 | group, blanket, or franchise insurance policy or insurance |
| 13 | agreement, a group hospital service contract, or an individual or |
| 14 | group evidence of coverage or similar coverage document that is |
| 15 | offered by: |
| 16 | (1) an insurance company; |
| 17 | (2) a group hospital service corporation operating |
| 18 | under Chapter 842; |
| 19 | (3) a health maintenance organization operating under |
| 20 | Chapter 843; |
| 21 | (4) an approved nonprofit health corporation that |
| 22 | holds a certificate of authority under Chapter 844; |
| 23 | (5) a multiple employer welfare arrangement that holds |
| 24 | a certificate of authority under Chapter 846; |

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               (6) a stipulated premium insurance company operating
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   under Chapter 884;
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               (7) a fraternal benefit society operating under
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   Chapter 885;
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               (8) a Lloyd's plan operating under Chapter 941; or
               (9) an exchange operating under Chapter 942.
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         (b) Notwithstanding any other law, this subchapter applies
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   to:
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               (1) a small employer health benefit plan subject to
   Chapter 1501, including coverage provided through a health group
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   cooperative under Subchapter B of that chapter;
               (2) a standard health benefit plan issued under
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   Chapter 1507;
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               (3) a basic coverage plan under Chapter 1551;
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               (4) a basic plan under Chapter 1575;
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               (5) a primary care coverage plan under Chapter 1579;
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               (6) a plan providing basic coverage under Chapter
   1601;
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               (7) health benefits provided by or through a church
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   benefits board under Subchapter I, Chapter 22, Business
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   Organizations Code;
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               (8) a regional or local health care program operated
   under Section 75.104, Health and Safety Code; and
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               (9) a self-funded health benefit plan sponsored by a
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   professional employer organization under Chapter 91, Labor Code.
         (c) This subchapter applies to coverage under a group health
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   benefit plan described by Subsection (a) provided to a resident of
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- 1 this state, regardless of whether the group policy, agreement, or
- 2 contract is delivered, issued for delivery, or renewed in this
- 3 state.
- 4 Sec. 1367.302. COVERAGE FOR GENERAL ANESTHESIA. A health
- 5 benefit plan that provides coverage for general anesthesia may not
- 6 exclude from coverage general anesthesia services in connection
- 7 with dental services provided to a covered individual who is:
- 8 (1) younger than 18 years of age; and
- 9 (2) unable to undergo the dental service in an office
- 10 <u>setting due to a documented physical, mental, or medical</u> reason
- 11 determined by the individual's physician or by the dentist
- 12 providing the dental care.
- 13 Sec. 1367.303. COVERAGE NOT REQUIRED. This subchapter does
- 14 not require a health benefit plan to provide coverage for dental
- 15 care or procedures.
- 16 SECTION 2. Subchapter G, Chapter 1367, Insurance Code, as
- 17 added by this Act, applies only to a health benefit plan that is
- 18 delivered, issued for delivery, or renewed on or after January 1,
- 19 2022.
- 20 SECTION 3. This Act takes effect September 1, 2021.