

BILL ANALYSIS

C.S.H.B. 3524
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Insurance
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Pediatric patients are experiencing delays in dental care because medical insurance will not cover general anesthesia for dental procedures. According to some dentists, insurers often require the pediatric patient needing a dental procedure to be swollen with an infection in the face and head and to be acutely ill before the anesthesia coverage is permitted. According to the American Academy of Pediatric Dentistry, over 30 states have some form of required general anesthesia coverage for pediatric dental patients. The lack of general anesthesia coverage for dental procedures is prohibiting our youngest Texans from receiving care. C.S.H.B. 3524 seeks to prohibit a health benefit plan that provides coverage for general anesthesia from excluding medically necessary coverage for general anesthesia in connection with dental procedures for certain pediatric patients.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 3524 amends the Insurance Code to prohibit a health benefit plan that provides coverage for general anesthesia from excluding medically necessary general anesthesia services in connection with dental services provided to a covered individual from coverage if the following conditions are satisfied:

- the individual is younger than 13 years of age and unable to undergo the dental service without general anesthesia due to a documented physical, mental, or medical reason; and
- the anesthesia is performed by a qualified provider of anesthesia services.

The provisions of the bill expressly do not require the health benefit plan to provide coverage for the dental care or procedures.

C.S.H.B. 3524 specifies the types of plans to which its provisions apply and applies only to such a plan delivered, issued for delivery, or renewed on or after January 1, 2024.

EFFECTIVE DATE

September 1, 2023.

COMPARISON OF INTRODUCED AND SUBSTITUTE

While C.S.H.B. 3524 may differ from the introduced in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute revises the provisions in the introduced as follows:

- omits the provision in the introduced subjecting health benefits provided by or through a church benefits board to the bill's provisions;
- omits the provision in the introduced establishing that the bill applies to coverage under an applicable group health benefit plan provided to a Texas resident, regardless of whether the group policy, agreement, or contract is delivered, issued for delivery, or renewed in Texas;
- includes a specification absent from the introduced that the general anesthesia services which a health benefit plan is prohibited from excluding from coverage under the bill are medically necessary general anesthesia services;
- omits a requirement in the introduced that, for purposes of that prohibition, the covered individual's inability to undergo the dental service without general anesthesia due to a documented physical, mental, or medical reason be determined by the individual's physician or by the dentist providing the dental care; and
- requires the anesthesia to which the bill's prohibition applies to be performed by a qualified provider of anesthesia services, whereas the introduced required the anesthesia to be performed and billed separately by a licensed physician anesthesiologist or by a licensed dentist anesthesiologist who holds a permit to administer general anesthesia.