

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

1 SB296

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4 ENROLLED, An Act,

5 Relating to the terms of certain health insurance
6 policies, health maintenance organization plans, and other
7 health benefit plans, with respect to dental services; to
8 prohibit a policy or plan to set fees for services that are
9 not covered by the plan or policy; and to provide certain
10 exceptions.

11 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

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

14 (1) COVERED PERSON. Any individual, family, or
15 family member on whose behalf third-party payment or
16 prepayment of health or medical expenses is provided under an
17 insurance policy, plan, or contract providing for third-party
18 payment or prepayment of health care or medical expenses.

19 (2) COVERED SERVICES. Dental care services for which
20 a reimbursement is available under an enrollee's plan
21 contract, or for which a reimbursement would be available but
22 for the application of contractual limitations such as
23 deductibles, copayments, coinsurance, waiting periods, annual
24 or lifetime maximums, frequency limitations, alternative
25 benefit payments, or any other limitation.

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

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

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

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

21 Section 3. Nothing in this act shall be construed as
22 limiting the ability of an insurer or a third-party
23 administrator to restrict any of the following as related to
24 covered services:

25 (1) Balance billing.

1 (2) Waiting periods.

2 (3) Frequency limitations.

3 (4) Deductibles.

4 (5) Maximum annual benefits.

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

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

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President and Presiding Officer of the Senate

Speaker of the House of Representatives

SB296

Senate 12-MAY-15

I hereby certify that the within Act originated in and passed the Senate, as amended.

Patrick Harris
Secretary

House of Representatives
Passed: 04-JUN-15

By: Senator Bussman