

HOUSE No. 3570

The Commonwealth of Massachusetts

PRESENTED BY:

Sean Garballey

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to dental anesthesia.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Sean Garballey</i>	<i>23rd Middlesex</i>
<i>Susannah M. Whipps</i>	<i>2nd Franklin</i>
<i>John W. Scibak</i>	<i>2nd Hampshire</i>
<i>Linda Dean Campbell</i>	<i>15th Essex</i>
<i>Brian M. Ashe</i>	<i>2nd Hampden</i>
<i>Carole A. Fiola</i>	<i>6th Bristol</i>
<i>Denise Provost</i>	<i>27th Middlesex</i>
<i>Mary S. Keefe</i>	<i>15th Worcester</i>
<i>Colleen M. Garry</i>	<i>36th Middlesex</i>
<i>Marjorie C. Decker</i>	<i>25th Middlesex</i>
<i>Barbara A. L'Italien</i>	<i>Second Essex and Middlesex</i>
<i>Chris Walsh</i>	<i>6th Middlesex</i>
<i>David M. Rogers</i>	<i>24th Middlesex</i>
<i>David Paul Linsky</i>	<i>5th Middlesex</i>

HOUSE No. 3570

By Mr. Garballey of Arlington, a petition (accompanied by bill, House, No. 3570) of Sean Garballey and others relative to insurance coverage for hospital or ambulatory center charges for certain dental procedures requiring general anesthesia. Financial Services.

The Commonwealth of Massachusetts

**In the One Hundred and Ninetieth General Court
(2017-2018)**

An Act relative to dental anesthesia.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Chapter 32A of the General Laws is hereby amended by inserting after
2 section 17O, as inserted by chapter 233 of the acts 2016, the following section:-

3 Section 17P. Any coverage offered by the commission to an active or retired employee of
4 the commonwealth insured under the group insurance commission shall provide coverage for the
5 hospital or ambulatory center charges and administration of general anesthesia administered by a
6 licensed anesthesiologist or certified registered nurse anesthetist for dental procedures performed
7 on a covered person who is: (i) a child seven years of age or younger who is determined by a
8 licensed dentist to be unable to receive needed dental treatment in an outpatient setting, and the
9 provider treating the patient certifies that due to the patientting, st hesia administered by a
10 licensed anesthesiologist or certified registered nurse anesthetist for dentacenter is required in
11 order to perform significantly complex dental procedures safely and effectively; (ii) a child 12
12 years of age or younger with documented phobias or a documented mental illness, as determined

13 by a physician or by a licensed mental health professional, whose dental needs are sufficiently
14 complex and urgent that delaying or deferring treatment may result in infection or loss of teeth;
15 for whom a successful result cannot be expected from dental care provider under local
16 anesthesia; and for whom a superior result can be expected from dental care provided under
17 general anesthesia; or (iii) a person who has exceptional medical circumstances or a development
18 disability, as determined by a licensed physician which places the person at serious risk.

19 The coverage required by this section may be subject to prior authorization for general
20 anesthesia and associated hospital or ambulatory surgical center charges for dental care in the
21 same manner that prior authorization is required for these benefits in connection with other
22 covered medical care.

23 The coverage required by this section may be restricted to dental care that is provided
24 by: (i) fully accredited specialist in pediatric dentistry; (ii) a fully accredited specialist in oral and
25 maxillofacial surgery; and (iii) a dentist to whom hospital privileges have been granted.

26 Nothing in this section shall require coverage for the dental procedures or other dental
27 care for which general anesthesia is provided; and provided, that coverage shall be subject to
28 annual deductible, co-payment, or co-insurance requirements, and any other general exclusions
29 of a health insurance policy to the same extent as other medical services covered by the policy.

30 SECTION 2. Chapter 118E of the General Laws is hereby amended by inserting after
31 section 10J, as inserted by chapter 233 of the acts 2016, the following section:-

32 Section 10K. The division shall provide coverage for the hospital or ambulatory center
33 charges and administration of general anesthesia administered by a licensed anesthesiologist or
34 certified registered nurse anesthetist for dental procedures performed on a covered person who

35 is: (i) a child seven years of age or younger who is determined by a licensed dentist to be unable
36 to receive needed dental treatment in an outpatient setting, and the provider treating the patient
37 certifies that due to the patient's age and the patient's condition, hospitalization or general
38 anesthesia in a hospital or ambulatory surgical center is required in order to perform significantly
39 complex dental procedures safely and effectively; (ii) a child 12 years of age or younger with
40 documented phobias or a documented mental illness, as determined by a physician or by a
41 licensed mental health professional, whose dental needs are sufficiently complex and urgent that
42 delaying or deferring treatment may result in infection or loss of teeth; for whom a successful
43 result cannot be expected from dental care provider under local anesthesia; and for whom a
44 superior result can be expected from dental care provided under general anesthesia; or (iii) a
45 person who has exceptional medical circumstances or a development disability, as determined by
46 a licensed physician which places the person at serious risk.

47 The coverage required by this section may be subject to prior authorization for general
48 anesthesia and associated hospital or ambulatory surgical center charges for dental care in the
49 same manner that prior authorization is required for these benefits in connection with other
50 covered medical care.

51 The coverage required by this section may be restricted to dental care that is provided by:
52 (i) fully accredited specialist in pediatric dentistry; (ii) a fully accredited specialist in oral and
53 maxillofacial surgery; and (iii) a dentist to whom hospital privileges have been granted.

54 Nothing in this section shall require coverage for the dental procedures or other dental
55 care for which general anesthesia is provided; and provided, that coverage shall be subject to

56 annual deductible, co-payment, or co-insurance requirements, and any other general exclusions
57 of a health insurance policy to the same extent as other medical services covered by the policy.

58 SECTION 3. Chapter 175 of the General Laws is hereby amended by inserting after
59 section 47II, as inserted by chapter 233 of the acts 2016, the following section:-

60 Section 47JJ. A policy, contract, agreement, plan or certificate of insurance issued,
61 delivered or renewed within the commonwealth that provides medical expense coverage shall
62 provide coverage for the hospital or ambulatory center charges and administration of general
63 anesthesia administered by a licensed anesthesiologist or certified registered nurse anesthetist for
64 dental procedures performed on a covered person who is: (i) a child seven years of age or
65 younger who is determined by a licensed dentist to be unable to receive needed dental treatment
66 in an outpatient setting, and the provider treating the patient certifies that due to the patient's age
67 and the patient's condition, hospitalization or general anesthesia in a hospital or ambulatory
68 surgical center is required in order to perform significantly complex dental procedures safely and
69 effectively; (ii) a child 12 years of age or younger with documented phobias or a documented
70 mental illness, as determined by a physician or by a licensed mental health professional, whose
71 dental needs are sufficiently complex and urgent that delaying or deferring treatment may result
72 in infection or loss of teeth; for whom a successful result cannot be expected from dental care
73 provider under local anesthesia; and for whom a superior result can be expected from dental care
74 provided under general anesthesia; or (iii) a person who has exceptional medical circumstances
75 or a development disability, as determined by a licensed physician which places the person at
76 serious risk.

77 The coverage required by this section may be subject to prior authorization for general
78 anesthesia and associated hospital or ambulatory surgical center charges for dental care in the
79 same manner that prior authorization is required for these benefits in connection with other
80 covered medical care.

81 The coverage required by this section may be restricted to dental care that is provided by:
82 (i) fully accredited specialist in pediatric dentistry; (ii) a fully accredited specialist in oral and
83 maxillofacial surgery; and (iii) a dentist to whom hospital privileges have been granted.

84 Nothing in this section shall require coverage for the dental procedures or other dental
85 care for which general anesthesia is provided; and provided, that coverage shall be subject to
86 annual deductible, co-payment, or co-insurance requirements, and any other general exclusions
87 of a health insurance policy to the same extent as other medical services covered by the policy.

88 SECTION 4. Chapter 176A of the General Laws is hereby amended by inserting after
89 section 8KK, as inserted by chapter 233 of the acts 2016, the following section:-

90 Section 8LL. A contract between a subscriber and the corporation under an individual or
91 group hospital service plan that is delivered, issued or renewed within the commonwealth shall
92 provide coverage for the hospital or ambulatory center charges and administration of general
93 anesthesia administered by a licensed anesthesiologist or certified registered nurse anesthetist for
94 dental procedures performed on a covered person who is: (i) a child seven years of age or
95 younger who is determined by a licensed dentist to be unable to receive needed dental treatment
96 in an outpatient setting, and the provider treating the patient certifies that due to the patient's age
97 and the patient's condition, hospitalization or general anesthesia in a hospital or ambulatory
98 surgical center is required in order to perform significantly complex dental procedures safely and

99 effectively; (ii) a child 12 years of age or younger with documented phobias or a documented
100 mental illness, as determined by a physician or by a licensed mental health professional, whose
101 dental needs are sufficiently complex and urgent that delaying or deferring treatment may result
102 in infection or loss of teeth; for whom a successful result cannot be expected from dental care
103 provider under local anesthesia; and for whom a superior result can be expected from dental care
104 provided under general anesthesia; or (iii) a person who has exceptional medical circumstances
105 or a development disability, as determined by a licensed physician which places the person at
106 serious risk.

107 The coverage required by this section may be subject to prior authorization for general
108 anesthesia and associated hospital or ambulatory surgical center charges for dental care in the
109 same manner that prior authorization is required for these benefits in connection with other
110 covered medical care.

111 The coverage required by this section may be restricted to dental care that is provided by:
112 (i) fully accredited specialist in pediatric dentistry; (ii) a fully accredited specialist in oral and
113 maxillofacial surgery; and (iii) a dentist to whom hospital privileges have been granted.

114 Nothing in this section shall require coverage for the dental procedures or other dental
115 care for which general anesthesia is provided; and provided, that coverage shall be subject to
116 annual deductible, co-payment, or co-insurance requirements, and any other general exclusions
117 of a health insurance policy to the same extent as other medical services covered by the policy.

118 SECTION 5. Chapter 176B of the General Laws is hereby amended by inserting after
119 section 4KK, as inserted by chapter 233 of the acts 2016, the following section:-

120

121 Section 4LL. A subscription certificate under an individual or group medical service
122 agreement delivered, issued or renewed within the commonwealth shall provide coverage for the
123 hospital or ambulatory center charges and administration of general anesthesia administered by a
124 licensed anesthesiologist or certified registered nurse anesthetist for dental procedures performed
125 on a covered person who is: (i) a child seven years of age or younger who is determined by a
126 licensed dentist to be unable to receive needed dental treatment in an outpatient setting, and the
127 provider treating the patient certifies that due to the patient's age and the patient's condition,
128 hospitalization or general anesthesia in a hospital or ambulatory surgical center is required in
129 order to perform significantly complex dental procedures safely and effectively; (ii) a child 12
130 years of age or younger with documented phobias or a documented mental illness, as determined
131 by a physician or by a licensed mental health professional, whose dental needs are sufficiently
132 complex and urgent that delaying or deferring treatment may result in infection or loss of teeth;
133 for whom a successful result cannot be expected from dental care provider under local
134 anesthesia; and for whom a superior result can be expected from dental care provided under
135 general anesthesia; or (iii) a person who has exceptional medical circumstances or a development
136 disability, as determined by a licensed physician which places the person at serious risk.

137 The coverage required by this section may be subject to prior authorization for general
138 anesthesia and associated hospital or ambulatory surgical center charges for dental care in the
139 same manner that prior authorization is required for these benefits in connection with other
140 covered medical care.

141 The coverage required by this section may be restricted to dental care that is provided
142 by: (i) fully accredited specialist in pediatric dentistry; (ii) a fully accredited specialist in oral and
143 maxillofacial surgery; and (iii) a dentist to whom hospital privileges have been granted.

144 Nothing in this section shall require coverage for the dental procedures or other dental
145 care for which general anesthesia is provided; and provided, that coverage shall be subject to
146 annual deductible, co-payment, or co-insurance requirements, and any other general exclusions
147 of a health insurance policy to the same extent as other medical services covered by the policy.a

148 SECTION 6. Chapter 176G of the General Laws is hereby amended by inserting after
149 section 4CC, as inserted by chapter 233 of the acts 2016, the following section:-

150

151 Section 4DD. An individual or group health maintenance contract shall provide coverage
152 for a dental procedure that is related to or resulting from a medical condition for the hospital or
153 ambulatory center charges and administration of general anesthesia administered by a licensed
154 anesthesiologist or certified registered nurse anesthetist for dental procedures performed on a
155 covered person who is: (i) a child seven years of age or younger who is determined by a licensed
156 dentist to be unable to receive needed dental treatment in an outpatient setting, and the provider
157 treating the patient certifies that due to the patient's age and the patient's condition,
158 hospitalization or general anesthesia in a hospital or ambulatory surgical center is required in
159 order to perform significantly complex dental procedures safely and effectively; (ii) a child 12
160 years of age or younger with documented phobias or a documented mental illness, as determined
161 by a physician or by a licensed mental health professional, whose dental needs are sufficiently
162 complex and urgent that delaying or deferring treatment may result in infection or loss of teeth;
163 for whom a successful result cannot be expected from dental care provider under local
164 anesthesia; and for whom a superior result can be expected from dental care provided under

165 general anesthesia; or (iii) a person who has exceptional medical circumstances or a development
166 disability, as determined by a licensed physician which places the person at serious risk.

167 The coverage required by this section may be subject to prior authorization for general
168 anesthesia and associated hospital or ambulatory surgical center charges for dental care in the
169 same manner that prior authorization is required for these benefits in connection with other
170 covered medical care.

171 The coverage required by this section may be restricted to dental care that is provided
172 by: (i) fully accredited specialist in pediatric dentistry; (ii) a fully accredited specialist in oral and
173 maxillofacial surgery; and (iii) a dentist to whom hospital privileges have been granted.

174 Nothing in this section shall require coverage for the dental procedures or other dental
175 care for which general anesthesia is provided; and provided, that coverage shall be subject to
176 annual deductible, co-payment, or co-insurance requirements, and any other general exclusions
177 of a health insurance policy to the same extent as other medical services covered by the policy.

178 SECTION 7. This act shall apply to all health insurance policies offered, issued, or
179 renewed on or after the effective date of this act.