

House Bill 189 (AS PASSED HOUSE AND SENATE)

By: Representatives Wilkinson of the 52nd, Maxwell of the 17th, Shaw of the 176th, Hembree of the 67th, Mitchell of the 88th, and others

A BILL TO BE ENTITLED
AN ACT

1 To amend Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated,
2 relating to general provisions regarding insurance, so as to provide that no contract or
3 agreement between a dental insurer or network and a dentist shall require the dentist to
4 accept an amount for dental care services that are not covered dental services under a dental
5 benefit plan; to provide that no dental insurer shall publish or otherwise communicate that
6 discounts are available for noncovered dental services; to provide for a short title; to provide
7 for definitions; to provide for related matters; to repeal conflicting laws; and for other
8 purposes.

9 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

10 **SECTION 1.**

11 This Act shall be known and may be cited as the "Noncovered Dental Services Act."

12 **SECTION 2.**

13 Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to
14 general provisions regarding insurance, is amended by adding a new Code section to read as
15 follows:

16 "33-24-59.14.

17 (a) As used in this Code section:

18 (1) 'Covered dental services' means dental care services for which a reimbursement is
19 available under a covered person's dental benefit plan, or for which a reimbursement
20 would be available but for the application of contractual limitations such as deductibles,
21 copayments, coinsurance, waiting periods, annual or lifetime maximums, frequency
22 limitations, alternative benefit payments, or any other limitation.

23 (2) 'Covered person' means any subscriber, enrollee, member, beneficiary, or participant,
24 or his or her dependent, for whom benefits are payable when that covered person receives

25 dental care services rendered or authorized by a dentist licensed under Chapter 11 of Title
26 43.
27 (3) 'Dental benefit plan' means any individual or group plan, policy, contract, or
28 subscription agreement which includes or is for dental care services that is issued,
29 delivered, issued for delivery, or renewed in this state whether by a health care insurer,
30 health maintenance organization, preferred provider organization, accident and sickness
31 insurer, fraternal benefit society, nonprofit hospital service corporation, nonprofit medical
32 or dental service corporation, health care plan, or any other person, firm, corporation,
33 joint venture, or other similar business entity that pays for, purchases, or furnishes dental
34 care services to patients, insureds, beneficiaries, or covered dependents in this state.
35 (4) 'Dental insurer' means any person, firm, corporation, joint venture, or other similar
36 business entity that offers dental benefit plans in consideration of periodic payments.
37 (b) No contract between a dental insurer and a dentist shall require a dentist to accept an
38 amount set by the dental insurer as payment for dental care services that are not covered
39 dental services under the covered person's dental benefit plan.
40 (c) A dental insurer or other person or entity providing third-party administrator services
41 shall not make available any providers in its dentist network to a plan that sets dental fees
42 for any services except covered services.
43 (d) A dental insurer shall not draft, publish, disseminate, or circulate explanation of benefit
44 forms that include language which directly or indirectly implies that a dentist may or
45 should extend discounts to patients for noncovered dental services. Statements by a dental
46 insurer which are prohibited by this Code section include but are not limited to, 'Our
47 members value the services you provide and we encourage you to continue extending the
48 discount on noncovered services.'"

49 **SECTION 3.**

50 All laws and parts of laws in conflict with this Act are repealed.