

§4257. Coverage for services provided by independent practice dental hygienist

1. Services provided by independent practice dental hygienist. All individual and group health maintenance organization contracts that include coverage for dental services shall provide coverage for dental services performed by an independent practice dental hygienist licensed under Title 32, chapter 143 when those services are covered services under the contract and when they are within the lawful scope of practice of the independent practice dental hygienist.
[PL 2015, c. 429, §15 (AMD).]

2. Limits; coinsurance; deductibles. A contract that provides coverage for the services required by this section may contain provisions for maximum benefits and coinsurance and reasonable limitations, deductibles and exclusions to the extent that these provisions are not inconsistent with the requirements of this section.
[PL 2009, c. 307, §4 (NEW); PL 2009, c. 307, §6 (AFF).]

3. Coordination of benefits with dental insurance. If an enrollee eligible for coverage under this section is eligible for coverage under a dental insurance policy or contract and a health maintenance organization policy or contract, the insurer providing dental insurance is the primary payer responsible for charges under subsection 1 and the health maintenance organization providing health coverage is the secondary payer.
[PL 2009, c. 307, §4 (NEW); PL 2009, c. 307, §6 (AFF).]

4. Application. The requirements of this section apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State. For purposes of this section, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.
[PL 2009, c. 307, §4 (NEW); PL 2009, c. 307, §6 (AFF).]

SECTION HISTORY

PL 2009, c. 307, §4 (NEW). PL 2009, c. 307, §6 (AFF). PL 2015, c. 429, §15 (AMD).

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