

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

An Act Regarding Insurance Coverage of Certain Dental Services

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 24 MRSA §2317-B, sub-§12-I is enacted to read:

12-I. Title 24-A, sections 2770, 2847-V and 4260. Limits on fees for dental services, Title 24-A, sections 2770, 2847-V and 4260;

Sec. 2. 24-A MRSA §2770 is enacted to read:

§ 2770. Limits on fees for dental services

An insurer that issues individual dental insurance or health insurance that includes coverage for dental services may not restrict, limit or otherwise control a fee that a dentist charges a patient for services not covered by the patient's policy or contract or the portion of a total fee for a covered service that exceeds the amount covered by the patient's policy or contract.

Sec. 3. 24-A MRSA §2847-V is enacted to read:

§ 2847-V. Limits on fees for dental services

An insurer that issues group dental insurance or health insurance that includes coverage for dental services may not restrict, limit or otherwise control a fee that a dentist charges a patient for services not covered by the patient's policy or contract or the portion of a total fee for a covered service that exceeds the amount covered by the patient's policy or contract.

Sec. 4. 24-A MRSA §4260 is enacted to read:

§ 4260. Limits on fees for dental services

All individual and group health maintenance organization contracts that include coverage for dental services may not restrict, limit or otherwise control a fee that a dentist charges a patient for services not covered by the patient's policy or contract or the portion of a total fee for a covered service that exceeds the amount covered by the patient's policy or contract.

Sec. 5. Application. The requirements of this Act apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2018. For purposes of this Act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

SUMMARY

This bill prevents insurers and health maintenance organizations offering individual and group coverage from limiting dental fees that are not covered by the insurer or the portion of a dental fee that

exceeds the amount covered. The provision applies to all individual and group health insurance policies, contracts and certificates issued or renewed on or after January 1, 2018.