

Requested by Representative PHAM K

**PROPOSED AMENDMENTS TO
HOUSE BILL 3008**

1 On page 1 of the printed bill, delete lines 6 through 30.

2 On page 2, delete lines 1 through 31 and insert:

3 **“SECTION 2. (1) As used in this section, ‘dental insurer’ means an**
4 **insurer that offers a policy or certificate of insurance or other con-**
5 **tract, that provides only a dental benefit.**

6 **“(2) A dental insurer may pay a claim for reimbursement made by**
7 **a dental care provider using a credit card or electronic funds transfer**
8 **payment method that imposes on the provider a fee or similar charge**
9 **to process the payment if:**

10 **“(a) The dental insurer notifies the provider, in advance, of the**
11 **potential fees or other charges associated with the use of the credit**
12 **card or electronic funds transfer payment method;**

13 **“(b) The dental insurer offers the provider an alternative payment**
14 **method that does not impose fees or similar charges on the provider;**
15 **and**

16 **“(c) The provider or a designee of the provider elects to accept a**
17 **payment of the claim using the credit card or electronic funds transfer**
18 **payment method.**

19 **“(3) If a dental insurer contracts with a vendor to process payments**
20 **of dental providers’ claims, the dental insurer shall require the vendor**
21 **to comply with the provisions of subsection (2)(a) of this section.**

1 **“SECTION 3. (1) As used in this section:**

2 **“(a) ‘Dental insurer’ means an insurer that offers a policy or cer-**
3 **tificate of insurance or other contract, that provides only a dental**
4 **benefit.**

5 **“(b) ‘Third party’ means an entity that contracts with a dental**
6 **insurer to gain access to the dental care services and discounted rates**
7 **of dental care providers under the dental insurer’s provider network**
8 **contract.**

9 **“(2) A dental insurer may not contract with a third party to provide**
10 **access to the dental care services and discounted rates of a dental care**
11 **provider under a provider network contract unless:**

12 **“(a) The dental insurer allows any dental care provider in the net-**
13 **work to choose not to allow the third party to access the dental care**
14 **provider’s services and discounted rates:**

15 **“(A) At the time the contract is entered into or renewed; and**

16 **“(B) Whenever there is a material modification to the provider**
17 **network contract that allows a third party access to the provider net-**
18 **work contract;**

19 **“(b) The dental insurer allows the dental care provider that chooses**
20 **not to participate as described in paragraph (a) of this subsection to**
21 **contract with the third party directly;**

22 **“(c) The provider network contract specifically authorizes the third**
23 **party contract and the provider agrees to the provision; and**

24 **“(d) The third party contract obligates the third party to comply**
25 **with all applicable terms, limitations and conditions of the provider**
26 **network contract.**

27 **“(3) A dental insurer may not:**

28 **“(a) Cancel or otherwise terminate a network provider contract**
29 **with a dental care provider on the grounds that the dental care pro-**
30 **vider refuses to allow access by a third party to the dental care ser-**

1 vices and discounted rates of the dental care provider; or

2 “(b) Refuse to contract with a dental care provider on the grounds
3 that the dental care provider refuses to agree to a provision in a pro-
4 vider network contract.

5 “(4) A dental insurer that contracts with a third party to provide
6 access to the services and discounted rates of a dental care provider
7 under a provider network contract shall:

8 “(a) At the time a provider network contract is entered into, re-
9 newed or extended, give to the provider, in writing or electronically,
10 a list of all third parties known by the dental insurer to which the
11 dental insurer has or will provide access to the dental care services
12 and discounted rates of the provider under the provider network con-
13 tract;

14 “(b) Maintain an Internet website through which the provider may
15 obtain a list, updated at least every 90 days, of all third parties that
16 have access to the provider’s dental care services and discounted rates
17 under the provider network contract;

18 “(c) Require a third party to identify on each remittance or expla-
19 nation of payment sent to a provider the source of any contractual
20 discount in rates taken by the third party under the provider network
21 contract;

22 “(d) Notify the provider no less than 30 days prior to the effective
23 date of a new third party contract;

24 “(e) Notify each third party described under paragraph (a) or (b) of
25 this subsection of the termination of the provider network contract
26 no later than 30 days prior to the effective date of the termination;
27 and

28 “(f) Make available to a provider within 30 days of the provider’s
29 request a copy of the provider network contract currently in force that
30 was relied upon by the dental insurer in the adjudication of the

1 provider's claim.

2 “(5) The notice required under subsection (4)(d) and (e) of this sec-
3 tion can be provided by any reasonable means, including but not lim-
4 ited to written notice, electronic communication or an update to an
5 electronic database.

6 “(6) Subject to any applicable continuity of care requirements,
7 agreements or contractual provisions, a third party's right to access
8 a dental care provider's services and discounted rates under a provider
9 network contract shall terminate on the date the provider network
10 contract is terminated.

11 “(7) The requirements of this section may not be waived by agree-
12 ment. Any contract provision that purports to waive the requirements
13 of this section or that conflicts with the requirements of this section
14 is null and void.

15 “(8) This section does not apply to:

16 “(a) Contracts between a dental insurer and a licensee or affiliate
17 of the dental insurer.

18 “(b) The state medical assistance program.”.

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