

By the Committee on Banking and Insurance and Senators  
Latvala, Myers, Gutman, Bronson, Casas and Campbell

311-2147-98

1                                   A bill to be entitled  
2           An act relating to dental insurance coverage;  
3           creating ss. 627.4295, 627.65755, F.S., and  
4           amending ss. 627.6515 and 641.31, F.S.;  
5           requiring health insurance policies and health  
6           maintenance organization contracts to provide  
7           coverage for general anesthesia and  
8           hospitalization for certain persons under  
9           certain circumstances; providing application;  
10          providing exceptions; providing a declaration  
11          of important state interest; providing  
12          application; providing an effective date.

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14 Be It Enacted by the Legislature of the State of Florida:

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16           Section 1. Section 627.4295, Florida Statutes, is  
17 created to read:

18           627.4295 Dental procedures; anesthesia and  
19 hospitalization coverage.--For purposes of this section,  
20 dental treatment or surgery shall be considered necessary when  
21 the dental condition is likely to result in a medical  
22 condition if left untreated. Any individual health insurance  
23 policy issued or issued for delivery in this state which  
24 provides coverage for general anesthesia and hospitalization  
25 services to a covered person shall not preclude such coverage  
26 in assuring the safe delivery of necessary dental care  
27 provided to a covered person who:

28           (1) Is under 8 years of age and is determined by a  
29 licensed dentist, in consultation with the child's physician  
30 licensed under chapter 458 or chapter 459, to require  
31 necessary dental treatment in a hospital or ambulatory

1 surgical center due to a significantly complex dental  
2 condition or a developmental disability in which patient  
3 management in the dental office has proved to be ineffective;  
4 or

5 (2) Has one or more medical conditions that would  
6 create significant or undue medical risk for the individual in  
7 the course of delivery of any necessary dental treatment or  
8 surgery if not rendered in a hospital or ambulatory surgical  
9 center.

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11 As provided in this section, all terms and conditions of the  
12 covered person's health insurance policy shall apply to such  
13 services and this section does not require coverage for the  
14 diagnosis or treatment of dental disease. An insurer may  
15 require prior authorization for general anesthesia and  
16 hospital services required under this section in the same  
17 manner the insurer requires prior authorization for  
18 hospitalization for other covered services. This section does  
19 not apply to Medicare supplement, long-term-care, disability,  
20 limited benefit, or specified disease policies.

21 Section 2. Subsection (8) is added to section  
22 627.6515, Florida Statutes, to read:

23 627.6515 Out-of-state groups.--

24 (8) For purposes of this subsection, dental treatment  
25 or surgery shall be considered necessary when the dental  
26 condition is likely to result in a medical condition if left  
27 untreated. Any group, franchise, or blanket health insurance  
28 policy issued or delivered outside this state, under which  
29 policy a resident of this state is provided coverage for  
30 general anesthesia and hospitalization services to a covered  
31 person, shall not preclude such coverage in assuring the safe

1 delivery of necessary dental care provided to a covered person  
2 who:

3 (a) Is under 8 years of age and is determined by a  
4 licensed dentist, in consultation with the child's physician  
5 licensed under chapter 458 or chapter 459, to require  
6 necessary dental treatment in a hospital or ambulatory  
7 surgical center due to a significantly complex dental  
8 condition or a developmental disability in which patient  
9 management in the dental office has proved to be ineffective;  
10 or

11 (b) Has one or more medical conditions that would  
12 create significant or undue medical risk for the individual in  
13 the course of delivery of any necessary dental treatment or  
14 surgery if not rendered in a hospital or ambulatory surgical  
15 center.

16  
17 As provided in this section, all terms and conditions of the  
18 covered person's health insurance policy shall apply to such  
19 services and this section does not require coverage for the  
20 diagnosis or treatment of dental disease. An insurer may  
21 require prior authorization for general anesthesia and  
22 hospital services required under this section in the same  
23 manner the insurer requires prior authorization for  
24 hospitalization for other covered services. This section does  
25 not apply to Medicare supplement, long-term-care, disability,  
26 limited benefit, or specified disease policies.

27 Section 3. Section 627.65755, Florida Statutes, is  
28 created to read:

29 627.65755 Dental procedures; anesthesia and  
30 hospitalization coverage.--For purposes of this section,  
31 dental treatment or surgery shall be considered necessary when

1 the dental condition is likely to result in a medical  
2 condition if left untreated. Any group, blanket, or franchise  
3 health insurance policy issued or issued for delivery in this  
4 state which provides coverage for general anesthesia and  
5 hospitalization services to a covered person shall not  
6 preclude such coverage in assuring the safe delivery of  
7 necessary dental care provided to a covered person who:  
8       (1) Is under 8 years of age and is determined by a  
9 licensed dentist, in consultation with the child's physician  
10 licensed under chapter 458 or chapter 459, to require  
11 necessary dental treatment in a hospital or ambulatory  
12 surgical center due to a significantly complex dental  
13 condition or a developmental disability in which patient  
14 management in the dental office has proved to be ineffective;  
15 or  
16       (2) Has one or more medical conditions that would  
17 create significant or undue medical risk for the individual in  
18 the course of delivery of any necessary dental treatment or  
19 surgery if not rendered in a hospital or ambulatory surgical  
20 center.  
21  
22 As provided in this section, all terms and conditions of the  
23 covered person's health insurance policy shall apply to such  
24 services and this section does not require coverage for the  
25 diagnosis or treatment of dental disease. An insurer may  
26 require prior authorization for general anesthesia and  
27 hospital services required under this section in the same  
28 manner the insurer requires prior authorization for  
29 hospitalization for other covered services. This section does  
30 not apply to Medicare supplement, long-term-care, disability,  
31 limited benefit, or specified disease policies.

1           Section 4. Subsection (34) is added to section 641.31,  
2 Florida Statutes, to read:

3           641.31 Health maintenance contracts.--

4           (34) For purposes of this subsection, dental treatment  
5 or surgery shall be considered necessary when the dental  
6 condition is likely to result in a medical condition if left  
7 untreated. Any health maintenance organization contract which  
8 provides coverage for general anesthesia and hospitalization  
9 services to a covered person shall not preclude such coverage  
10 in assuring the safe delivery of necessary dental care  
11 provided to a covered person who:

12           (a) Is under 8 years of age and is determined by a  
13 licensed dentist, in consultation with the child's physician  
14 licensed under chapter 458 or chapter 459, to require  
15 necessary dental treatment in a hospital or ambulatory  
16 surgical center due to a significantly complex dental  
17 condition or a developmental disability in which patient  
18 management in the dental office has proved to be ineffective;  
19 or

20           (b) Has one or more medical conditions that would  
21 create significant or undue medical risk for the individual in  
22 the course of delivery of any necessary dental treatment or  
23 surgery if not rendered in a hospital or ambulatory surgical  
24 center.

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26 As provided in this section, all terms and conditions of the  
27 covered person's health maintenance organization contract  
28 shall apply to such services and this section does not require  
29 coverage for the diagnosis or treatment of dental disease. A  
30 health maintenance organization may require prior  
31 authorization for general anesthesia and hospital services

1 required under this section in the same manner the  
2 organization requires prior authorization for hospitalization  
3 for other covered services. This section does not apply to  
4 Medicare supplement, long-term-care, disability, limited  
5 benefit, or specified disease policies.

6 Section 5. The provisions of this act fulfill an  
7 important state interest in that they promote the relief,  
8 alleviation, and prevention of health, dental, or medical  
9 problems associated with inadequate dental care.

10 Section 6. This act shall take effect October 1, 1998,  
11 and shall apply to any policy issued, written, or renewed, or  
12 contract entered into, on or after that date.

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1                   STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN  
2                   COMMITTEE SUBSTITUTE FOR  
3                   Senate Bill 792

4 The bill requires each individual health insurance policy,  
5 group health insurance policy, and health maintenance  
6 organization contract to provide coverage for charges for  
7 general anesthesia or hospitalization for dental care provided  
8 to a covered person who:

- 9     1.    Is 8 years of age or less and is determined by a licensed  
10         dentist, in consultation with the child's physician  
11         licensed under chapter 458 or 459, F.S., to require  
12         necessary dental treatment in a hospital or ambulatory  
13         surgical center due to a significantly complex dental  
14         condition or a developmental disability in which patient  
15         management in the dental office has proved to be  
16         ineffective; or
- 17     2.    Has one or more medical conditions that would create  
18         significant undue medical risk for the individual in the  
19         course of delivery of any necessary dental treatment or  
20         surgery if not rendered in a hospital or ambulatory  
21         surgical center.

22 All terms and conditions of the covered person's health  
23 insurance policy or contract would apply to such services and  
24 the provisions of the bill would not require coverage for the  
25 diagnosis or treatment of dental disease.

26 The provisions of the bill would not apply to Medicare  
27 supplement, long-term care, disability, limited benefit, or  
28 specified disease policies.

29 The bill provides that the provisions of this act fulfill an  
30 important state interest in that they promote the relief,  
31 alleviation, and prevention of health, dental, or medical  
problems associated with inadequate dental care.