

By Senator Carlton

24-398A-01

See HB 235

1                                   A bill to be entitled  
2           An act relating to dental service claim adverse  
3           determinations; amending s. 627.419, F.S.;  
4           providing for appeals from certain adverse  
5           determinations; providing procedures; providing  
6           requirements; providing a definition; providing  
7           an effective date.

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

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11           Section 1. Subsection (9) is added to section 627.419,  
12   Florida Statutes, to read:

13           627.419 Construction of policies.--

14           (9)(a) With respect to any group or individual insurer  
15 covering dental services, each claimant, or provider acting  
16 for a claimant, who has had an adverse determination rendered  
17 regarding a claim shall be provided an opportunity for an  
18 appeal to the insurer's licensed dentist who is responsible  
19 for the dentally necessary reviews under the plan or is a  
20 member of the plan's peer review group. The appeal may be made  
21 by telephone and the insurer's licensed physician shall  
22 respond within a reasonable time, not to exceed 15 business  
23 days.

24           (b) Any individual or group insurer offering dental  
25 coverage shall ensure that only a dentist licensed under  
26 chapter 466, or a dentist with an active, unencumbered license  
27 in another state with similar licensing requirements, may  
28 render an adverse determination regarding a service provided  
29 by a dentist licensed in this state. The insurer shall submit  
30 to the treating dentist and the subscriber written  
31 notification regarding the organization's adverse

1 determination within 2 working days after the subscriber or  
2 provider is notified of the adverse determination. The written  
3 notification shall include the criteria or benefits provisions  
4 used in the adverse determination, identify the dentist who  
5 rendered the adverse determination, and be signed by an  
6 authorized representative of the insurer or the dentist who  
7 rendered the adverse determination. The insurer shall include  
8 with the notification of an adverse determination information  
9 concerning the appeal process for adverse determinations.

10 (c) For purposes of this subsection, "adverse  
11 determination" means a determination, made by an insurer which  
12 covers dental services, that an admission, availability of  
13 care, continued stay, or other health care service has been  
14 reviewed and, based upon the information provided, does not  
15 meet the insurer's requirements for medical necessity,  
16 appropriateness, health care setting, level of care, or  
17 effectiveness and coverage for the requested service is  
18 therefore denied, reduced, altered, or terminated.

19 Section 2. This act shall take effect October 1, 2001.  
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22 HOUSE SUMMARY

23 Provides procedures and requirements for appeals from  
24 adverse determinations rendered on dental service claims.  
25 See bill for details.  
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