

1 H.734

2 Representative Dickinson of St. Albans Town moves that the bill be  
3 amended by striking out all after the enacting clause and inserting in lieu  
4 thereof the following:

5 Sec. 1. 8 V.S.A. chapter 110 is added to read:

6 CHAPTER 110. DENTAL INSURANCE

7 § 4121. DEFINITIONS

8 As used in this chapter:

9 (1) “Covered individual” means an individual covered under a dental  
10 insurance plan or a health insurance plan.

11 (2) “Covered service” means a dental service for which reimbursement  
12 is available under a covered individual’s dental insurance plan or health  
13 insurance plan or for which reimbursement would be available but for the  
14 application of contractual limitations such as deductibles, co-payments,  
15 coinsurance, waiting periods, annual or lifetime maximums, frequency  
16 limitations, alternative benefit payments, or other limitations.

17 (3) “Dental insurance plan” means a stand-alone dental plan or policy  
18 that provides coverage for dental services apart from a health insurance plan.

19 (4) “Dental insurer” means any health or dental insurance company,  
20 including a nonprofit dental service corporation, that offers a dental insurance  
21 plan for sale.

1           (5) “Dentist” means an individual licensed to practice dentistry under  
2           26 V.S.A. chapter 12.

3           (6) “Health insurer” has the same meaning as in 18 V.S.A. § 9402.

4           (7) “Health insurance plan” means any individual or group health  
5           insurance policy, any hospital or medical service corporation or health  
6           maintenance organization subscriber contract, or any other health benefit plan  
7           offered, issued, or renewed for any person in this State by a health insurer.  
8           The term does not include benefit plans providing coverage for specific disease  
9           or other limited benefit coverage.

10           § 4122. FEES FOR COVERED DENTAL SERVICES

11           (a) No dental insurer, health insurer, or other similar entity that covers  
12           dental services and is subject to regulation by the Department of Financial  
13           Regulation, and no contract or participating provider agreement with a dentist,  
14           shall require, directly or indirectly, that a dentist who is a participating  
15           provider provide dental services to a covered individual at a fee set by, or  
16           subject to the approval of, the insurer or other regulated entity unless the dental  
17           services are covered services.

18           (b) No person providing third-party administrator services shall make  
19           available to any customers a plan that sets dental fees for providers in its  
20           provider network for any dental services other than covered services.

1       (c) Fees for covered services shall be set in good faith and shall not be  
2       nominal.

3       (d) The Commissioner of Financial Regulation shall enforce the provisions  
4       of this section pursuant to the Commissioner’s authority under this title.

5       § 4123. PAYMENT FOR DENTAL SERVICES

6       (a) As used in this section, “credit card payment” means a type of  
7       electronic funds transfer in which a dental insurance plan or dental insurer or  
8       its contracted vendor issues a single-use series of numbers associated with  
9       payment for dental services delivered by a dentist and chargeable for a  
10       predetermined dollar amount, in which the dentist is responsible for processing  
11       the payment using a credit card terminal or Internet portal. The term includes  
12       virtual or online credit card payments in which no physical credit card is  
13       presented to the dentist and the single-use credit card number expires upon  
14       payment processing.

15       (b) A dental insurance plan, contract, or participating provider agreement  
16       with a dentist shall not contain restrictions on methods of payment from the  
17       dental insurer or its third party administrator to the dentist in which the only  
18       acceptable payment method is a credit card payment.

19       Sec. 2. EFFECTIVE DATE

20       This act shall take effect on January 1, 2021 and shall apply to all contracts  
21       and participating provider agreements between a dental insurer or third-party

1 administrator and a dentist that are entered into on or after that date and to all  
2 dental insurance plans issued on and after January 1, 2021 on such date as a  
3 dental insurer offers, issues, or renews the plan, but in no event later than  
4 January 1, 2022.