

**HOUSE . . . . . No. 939**

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**The Commonwealth of Massachusetts**

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**In the Year Two Thousand Nine**  
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An Act relative to anesthesia coverage for children hospitalized for dental treatment..

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1           SECTION 1. Chapter 175 of the General Laws, as so appearing in the 2006 Official  
2 Edition, is hereby amended by inserting after section 47T the following new section:- Section  
3 47U. Any individual policy of accident and sickness insurance issued pursuant to section 108  
4 which provides hospital expense and surgical expense insurance, except policies providing  
5 supplemental coverage to Medicare or other governmental programs, and any group blanket  
6 policy of accident and sickness insurance issued pursuant to section 110 which provides hospital  
7 expense and surgical expense insurance, except policies providing supplemental coverage to  
8 Medicare or other governmental programs, delivered, issued or reviewed by agreement between  
9 the insurer and the policyholder, within or without the commonwealth, shall provide coverage  
10 for anesthesia and out-patient facility (hospital and ambulatory surgical center) charges for dental  
11 care provided to a person who is a child under the age of six; or is severely disabled, or has a  
12 medical condition and who requires hospitalization for dental care procedures in the same  
13 manner that prior authorization is required for hospitalization for other covered diseases or  
14 conditions. Said policy shall provide coverage for general anesthesia rendered by an

15 anesthesiologist and hospital costs for a medical condition covered by the policy, regardless of  
16 whether the services are provided in an ambulatory surgical center (ASC) or hospital.

17 SECTION 2. Chapter 176A of the General Laws, as appearing in the 2006 Official  
18 Edition, is hereby amended by inserting after section 8AA the following new section:- Section  
19 8AB. Any contract between a subscriber and the corporation under an individual or group  
20 hospital service plan or certificate of health insurance which provides hospital expense and  
21 surgical expense insurance, except contracts providing supplemental coverage to Medicare or  
22 other governmental programs, delivered, issued or renewed by agreement between the insurer  
23 and the policy holder, within or without the commonwealth, shall provide benefits for residents  
24 of the commonwealth and to all individuals and group members having a principal place of  
25 employment within the commonwealth for anesthesia and hospital charges for dental care  
26 provided to a person who is a child under the age of six; or is severely disabled, or has a medical  
27 condition and who requires hospitalization or general anesthesia for dental care treatment. A  
28 carrier may require prior authorization of out-patient facility or hospitalization for dental care  
29 procedures in the same manner that prior authorization is required for hospitalization for other  
30 covered diseases or conditions. Said policy shall provide coverage for general anesthesia  
31 rendered by an anesthesiologist and hospital costs for aforementioned medical conditions  
32 covered by the policy, regardless of whether the services are provided in an ASC or hospital.

33 SECTION 3. Chapter 176B of the General Laws, as appearing in the 2006 Official  
34 Edition, is hereby amended by inserting a section 4R the following new section:- Section 4S.  
35 Any subscription certificate under an individual group medical service agreement which  
36 provides hospital expense and surgical expense insurance, except certificates which provides  
37 supplemental coverage to Medicare or to other governmental programs, delivered, issued or

38 renewed by agreement between insurer and the policyholder, within or without the  
39 commonwealth, shall provide benefits for all individual and group members having a principal  
40 place of employment within the commonwealth for anesthesia and ASC/hospital charges for  
41 dental care provided to a person who is a child under the age of six; or is severely disabled, or  
42 has a medical condition and who requires hospitalization or general anesthesia for dental care  
43 treatment carrier may require prior authorization of hospitalization for dental care procedure in  
44 the same manner that prior authorization is required for hospitalization for other covered diseases  
45 or conditions. Said policy shall provide coverage for general anesthesia rendered by an  
46 anesthesiologist and hospital costs for a medical condition covered by the policy, regardless of  
47 whether the services are provided in an ASC or hospital.

48 SECTION 4. Chapter 176G of the General Laws, as appearing in the 2006 Official  
49 Edition, is hereby amended by inserting after section 4Q the following new section :- Section 4R.  
50 Any individual or group health maintenance contracts, except contracts providing supplemental  
51 coverage to Medicare or other governmental programs, delivered, issued or renewed by  
52 agreement between the insurer and the policyholder, within or without the commonwealth, shall  
53 provide benefits for all individual and group members having a principal place of employment  
54 within the commonwealth for anesthesia and ASC/hospital charges provided to a person who is a  
55 child under the age of six; or is severely disabled, or has a medical condition and who requires  
56 hospitalization or general anesthesia for dental care treatment. A carrier may require prior  
57 authorization of hospitalization for dental care procedures in the same manner that prior  
58 authorization is required for hospitalization for other covered diseases or conditions. Said policy  
59 shall provide coverage for general anesthesia rendered by an anesthesiologist and hospital costs  
60 for aforementioned medical conditions covered by the policy, regardless of whether the services

61 are provided in an ASC or hospital. Nothing in this section shall prohibit any health maintenance  
62 organization from requiring members seeking ASC care/hospitalization and anesthesia for dental  
63 care procedures to use a network provider.