

**SENATE . . . . . No. 628**

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**The Commonwealth of Massachusetts**

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PRESENTED BY:

***Patrick M. O'Connor***

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*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to dental insurance assignment of benefits.

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PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Patrick M. O'Connor</i>	<i>Plymouth and Norfolk</i>	
<i>Paul R. Feeney</i>	<i>Bristol and Norfolk</i>	<i>4/26/2019</i>

**SENATE . . . . . No. 628**

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By Mr. O'Connor, a petition (accompanied by bill, Senate, No. 628) of Patrick M. O'Connor for legislation relative to dental insurance assignment of benefits. Financial Services.

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**The Commonwealth of Massachusetts**

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**In the One Hundred and Ninety-First General Court  
(2019-2020)**  
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An Act relative to dental insurance assignment of benefits.

*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. Section 1 of said chapter 176E of the General Laws, as so appearing the  
2 2016 Official Edition, is hereby amended by inserting the following definition:-

3 “Dental benefit plans”, any stand-alone dental plan that covers oral surgical care,  
4 services, procedures or benefits covered by any individual, general, blanket or group policy of  
5 health, accident and sickness insurance issued by an insurer licensed or otherwise authorized to  
6 transact accident and health insurance under chapter 175; any oral surgical care, services,  
7 procedures or benefits covered by a stand-alone individual or group dental medical service plan  
8 issued by a non-profit medical service corporation under chapter 176B; any oral surgical care,  
9 services, procedures or benefits covered by a stand-alone individual or group dental service plan  
10 issued by a dental service corporation organized under chapter 176E; any oral surgical care,  
11 services, procedures or benefits covered by a stand-alone individual or group dental health  
12 maintenance contract issued by a health maintenance organization organized under chapter  
13 176G; or any oral surgical care, services, procedures or benefits covered by a stand-alone

14 individual or group preferred provider dental plan issued by a preferred provider arrangement  
15 organized under chapter 176I.

16 SECTION 2. Said chapter 176E is hereby further amended by inserting after section 7 the  
17 following section:-

18 Section 7A. Dental insurance assignment of benefits. Dental benefit plans as defined in  
19 section 1 shall allow, as a provision in a group or individual policy, contract or health benefit  
20 plan for coverage of dental services, any person insured by such entity to direct, in writing, that  
21 benefits from a health benefit plan, policy or contract, be paid directly to a dental care provider  
22 who has not contracted with the entity to provide dental services to persons covered by the entity  
23 but otherwise meets the credentialing criteria of the entity. If written direction to pay is executed  
24 and written notice of the direction to pay is provided to such entity, the insuring entity shall pay  
25 the benefits directly to the dental care provider. Any efforts to modify the amount of benefits  
26 paid directly to the dental care provider under this section may include a reduction in benefits  
27 paid of no more than five percent (5%) less than the usual and customary rates paid to  
28 participating dentists. The entity paying the dentist, pursuant to a direction to pay duly executed  
29 by the subscriber, shall have the right to review the records of the dentist receiving such payment  
30 that relate exclusively to that particular subscriber/patient to determine that the service in  
31 question was rendered. Provided, however, this section shall not apply to insurance coverage  
32 providing benefits for: (1) hospital confinement indemnity; (2) disability income; (3) accident  
33 only; (4) long-term care; (5) Medicare supplement; (6) limited benefit health; (7) specified  
34 disease indemnity; (8) sickness or bodily injury or death by accident or both; and (9) other  
35 limited benefit policies.