

HOUSE No. 1292

The Commonwealth of Massachusetts

PRESENTED BY:

Angelo J. Puppolo, Jr.

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 financial services contracts for dental benefits corporations.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Angelo J. Puppolo, Jr.</i>	<i>12th Hampden</i>	<i>1/13/2025</i>
<i>Lindsay N. Sabadosa</i>	<i>1st Hampshire</i>	<i>1/28/2025</i>
<i>Meghan K. Kilcoyne</i>	<i>12th Worcester</i>	<i>1/28/2025</i>
<i>Patrick M. O'Connor</i>	<i>First Plymouth and Norfolk</i>	<i>3/14/2025</i>
<i>Adam J. Scanlon</i>	<i>14th Bristol</i>	<i>6/3/2025</i>
<i>Rodney M. Elliott</i>	<i>16th Middlesex</i>	<i>6/5/2025</i>
<i>Francisco E. Paulino</i>	<i>16th Essex</i>	<i>6/18/2025</i>
<i>Tackey Chan</i>	<i>2nd Norfolk</i>	<i>6/30/2025</i>

HOUSE No. 1292

By Representative Puppolo of Springfield, a petition (accompanied by bill, House, No. 1292) of Angelo J. Puppolo, Jr., Lindsay N. Sabadosa and Meghan K. Kilcoyne relative to financial services contracts for dental benefits corporations. Financial Services.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Fourth General Court
(2025-2026)**

An Act relative to financial services contracts for dental benefits corporations.

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 Chapter 175 of the General Laws as most recently appearing, is
2 hereby amended by inserting at the end of said section the following sentence "Covered services"
3 means dental care services for which a reimbursement is available under an enrollee’s plan
4 contract, or for which a reimbursement would be available but for the application of contractual
5 limitations such as deductibles, copayments, coinsurance, waiting periods, annual or lifetime
6 maximums, frequency limitations, alternative benefit payments, or any other limitation

7 SECTION 2. Section 1 of Chapter 175 of the General Laws as most recently appearing, is
8 hereby amended by inserting at the end of said section the following sentence "Dental plan" shall
9 include any policy of insurance which is issued by a health care service contractor which
10 provides for coverage of dental services not in connection with a medical plan.

11 SECTION 3. Section 108B of Chapter 175 of the General Laws, as most recently
12 appearing, is hereby amended by inserting at the end of said section the following sentence: -“No

13 contract of any health care service contractor that covers any dental services, and no contract or
14 participating provider agreement with a dentist may require, directly or indirectly, that a dentist
15 who is a participating provider provide services to an enrolled participant at a fee set by, or at a
16 fee subject to the approval of, the health care service contractor unless the dental services are
17 covered services. A health care service contractor or other person providing third party
18 administrator services shall not make available any providers in its dentist network to a plan that
19 sets dental fees for any services except covered services. “

20 SECTION 4. Section 7 of chapter 176B of the General Laws, as most recently appearing,
21 is hereby amended by inserting after the second paragraph the following paragraph: - “No such
22 agreement may require that a dentist provide dental services to subscribers or their covered
23 dependents at a particular fee unless the dental services are covered services.”

24 SECTION 5. Section 7 of chapter 176E of the General Laws, as most recently appearing,
25 is hereby amended by inserting after the second paragraph the following paragraph: - “No
26 written agreement between a dental service corporation and a participating dentist may require
27 that the dentist provide dental services to subscribers or their covered dependents at a particular
28 fee unless the dental services are covered services.”

29 SECTION 6. Section 21 of chapter 176G of the General Laws, as most recently
30 appearing, is hereby amended by inserting after subsection (d) the following sub-section:- “(e)
31 No contract between a health maintenance organization and a participating provider who is a
32 registered dentist may require that such dentist provide dental services to a member at a
33 particular fee unless the dental services are covered services.”

34 SECTION 6. Section 2 of chapter 176I of the General Laws, as most recently appearing,
35 is hereby amended by inserting after the first paragraph the following paragraph: - “No preferred
36 provider arrangement with a health care provider who is a registered dentist may require that
37 such dentist provide dental service to a covered person at a particular fee unless the dental
38 services are covered services.”