

HOUSE No. 5044

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, February 5, 2026.

The committee on Financial Services, to whom was referred the 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, reports recommending that the accompanying bill (House, No. 5044) ought to pass.

For the committee,

JAMES M. MURPHY.

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 appearing in the 2022
2 Official Edition, is hereby amended by inserting, following the definition for "Contract on a
3 Variable Basis", the following definition, "Covered services" means dental care services for
4 which a reimbursement is available under an enrollee's plan contract, or for which a
5 reimbursement would be available but for the application of contractual limitations such as
6 deductibles, copayments, coinsurance, waiting periods, annual or lifetime maximums, frequency
7 limitations, alternative benefit payments, or any other limitation.

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

12 SECTION 3. Section 108B of Chapter 175 of the General Laws, as appearing in the 2022
13 Official Edition, is hereby amended by inserting at the end of said section the following

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

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

25 SECTION 5. Section 7 of chapter 176E of the General Laws, as appearing in the 2022
26 Official Edition, is hereby amended by inserting after the second paragraph the following
27 paragraph: - “No written agreement between a dental service corporation and a participating
28 dentist may require that the dentist provide dental services to subscribers or their covered
29 dependents at a particular fee unless the dental services are covered services.”

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

35 SECTION 7. Section 2 of chapter 176I of the General Laws, as appearing in the 2022
36 Official Edition, is hereby amended by inserting after the first paragraph the following
37 paragraph: - “No preferred provider arrangement with a health care provider who is a registered
38 dentist may require that such dentist provide dental service to a covered person at a particular fee
39 unless the dental services are covered services.”