SENATE No.

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.

PETITION OF:

NAME:DISTRICT/ADDRESS:Michael D. BradySecond Plymouth and Norfolk

No. **SENATE**

[Pin Slip]

The Commonwealth of Massachusetts

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

An Act relative to Dental Insurance.

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 176X of the General Laws, as appearing in the 2022 Official 2 Edition, is hereby amended by striking out, in Section 2(d), lines 46 and 47, the words "or if a 3 carrier's reported contribution to surplus exceeds 1.9 per cent" 4 SECTION 2. Chapter 176X of the General Laws, as appearing in the 2022 Official 5 Edition, is hereby amended by striking out Section 3(a)(i) and inserting in place thereof the 6 following words:-market group size, including individual; small groups of 2-50; and large groups 7 of greater than 50; and 8 SECTION 3. Chapter 176X of the General Laws, as appearing in the 2022 Official
- 9 Edition, is hereby amended by striking out Section 3(c)
- 10 SECTION 4. Chapter 176X of the General Laws, as appearing in the 2022 Official
- 11 Edition, is hereby amended by inserting, in Section 3(e), after the words "60 days" in line 96,
- 12 the following words:- Life insurers will apply the RBC model according to 211 CMR 20.00.
- 13 Those life and other multi-line carriers that have the majority of their liabilities in non-dental or

- non-Massachusetts insurance lines shall not exceed 700% of their respective Company Action
 Level (CAL), as defined in 211 CMR 20.00. Massachusetts-based health and dental-only carriers
 shall apply the RBC model according to 211 CMR 25.
- SECTION 5. Chapter 176X of the General Laws, as appearing in the 2022 Official
 Edition, is hereby amended by striking out Section 3(f) and inserting in place thereof the
 following words:- The commissioner may waive specific reporting requirements in this section
 for carriers unable to provide the required information; provided, however, that the
 commissioner shall provide written notice of any such waiver to the joint committee on health
 care financing and the house and senate committees on ways and means.