SENATE DOCKET, NO. 667 FILED ON: 1/17/2013

SENATE . . . . . No. 424

The Commonwealth of Massachusetts

PRESENTED BY:

Harriette L. Chandler

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 to limit retroactive denials of dental insurance claims.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Harriette L. Chandler	*First Worcester*
John W. Scibak	*2nd Hampshire*
Gale D. Candaras	*First Hampden and Hampshire*

SENATE DOCKET, NO. 667 FILED ON: 1/17/2013

SENATE . . . . . No. 424

By Ms. Chandler, a petition (accompanied by bill, Senate, No. 424) of Harriette L. Chandler, John W. Scibak and Gale D. Candaras for legislation to limit retroactive denials of dental insurance claims. Financial Services.

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act to limit retroactive denials of dental insurance claims.

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

SECTION 1. Section 108B of Chapter 175 of the General Laws, as appearing in the 2008 Official Edition, is hereby amended by at the end thereof the following new paragraph:-

"In this paragraph "retroactive denial of a previously paid claim" means any attempt by an insurer to retroactively collect payments already made to a registered dentist with respect to a claim by requiring re-payment of such payments, reducing other payments currently owed to the dentist, withholding or setting off against future payments, or reducing or affecting the future claim payments to the dentist in any other manner. The insurer shall not impose on any registered dentist any retroactive denial of a previously paid claim or any part thereof unless:

(a) The insurer has provided the reason for the retroactive denial in writing to the dentist; and

(b) The time which has elapsed since the date of payment of the claim does not exceed 12 months. The retroactive denial of a previously paid claim may be permitted beyond 12 months from the date of payment only for the following reasons:

(1) The claim was submitted fraudulently;

(2) The claim payment was incorrect because the dentist or the insured was already paid for the dental care services identified in the claim;

(3) The dental care services identified in the claim were not delivered by the dentist;

18 (4) The claim payment was for services covered by Title XVIII, Title XIX, or Title XXI
19 of the Social Security Act;

20 (5) The claim payment is the subject of adjustment with another insurer, administrator, or
21 payor; or

22 (6) The claim payment is the subject of legal action.

23 An insurer shall notify a dentist at least 15 days in advance of the imposition of any
24 retroactive denials of previously paid claims. The dentist shall have 6 months from the date of
25 notification under this paragraph to determine whether the insured has other appropriate
26 insurance, which was in effect on the date of service. Notwithstanding the contractual terms
27 between the corporation and dentist, the corporation shall allow for the submission of a claim
28 that was previously denied by another insurer due to the insured's transfer or termination of
29 coverage."

30 SECTION 2. Section 7 of chapter 176B of the General Laws, as appearing in the 2008
31 Official Edition, is hereby amended by at the end thereof the following new paragraph:-

32 "In this paragraph "retroactive denial of a previously paid claim" means any attempt by a
33 corporation to retroactively collect payments already made to a registered dentist with respect to
34 a claim by requiring re-payment of such payments, reducing other payments currently owed to
35 the dentist, withholding or setting off against future payments, or reducing or affecting the future
36 claim payments to the dentist in any other manner. The corporation shall not impose on any
37 registered dentist any retroactive denial of a previously paid claim or any part thereof unless:

38 (a) The corporation has provided the reason for the retroactive denial in writing to the
39 dentist; and

40 (b) The time which has elapsed since the date of payment of the claim does not exceed 12
41 months. The retroactive denial of a previously paid claim may be permitted beyond 12 months
42 from the date of payment only for the following reasons:

43 (1) The claim was submitted fraudulently;

44 (2) The claim payment was incorrect because the dentist or the insured was already paid
45 for the dental care services identified in the claim;

46 (3) The dental care services identified in the claim were not delivered by the dentist;

47 (4) The claim payment was for services covered by Title XVIII, Title XIX, or Title XXI
48 of the Social Security Act;

49 (5) The claim payment is the subject of adjustment with another insurer, administrator, or
50 payor; or

51 (6) The claim payment is the subject of legal action.

52 A corporation shall notify a dentist at least 15 days in advance of the imposition of any
53 retroactive denials of previously paid claims. The dentist shall have 6 months from the date of
54 notification under this paragraph to determine whether the insured has other appropriate
55 insurance, which was in effect on the date of service. Notwithstanding the contractual terms
56 between the corporation and dentist, the corporation shall allow for the submission of a claim
57 that was previously denied by another insurer due to the insured's transfer or termination of
58 coverage."

59 SECTION 3. Section 7 of chapter 176E of the General Laws, as appearing in the 2008
60 Official Edition is hereby amended by at the end thereof the following new paragraph:-

61 "In this paragraph "retroactive denial of a previously paid claim" means any attempt by
62 the corporation to retroactively collect payments already made to a registered dentist with respect
63 to a claim by requiring re-payment of such payments, reducing other payments currently owed to
64 the dentist, withholding or setting off against future payments, or reducing or affecting the future
65 claim payments to the dentist in any other manner. The corporation shall not impose on any
66 registered dentist any retroactive denial of a previously paid claim or any part thereof unless:

67 (a) The corporation has provided the reason for the retroactive denial in writing to the
68 dentist; and

69 (b) The time which has elapsed since the date of payment of the claim does not exceed 12
70 months. The retroactive denial of a previously paid claim may be permitted beyond 12 months
71 from the date of payment only for the following reasons:

72 (1) The claim was submitted fraudulently;

73 (2) The claim payment was incorrect because the dentist or the insured was already paid
74 for the dental care services identified in the claim;

75 (3) The dental care services identified in the claim were not delivered by the dentist;

76 (4) The claim payment was for services covered by Title XVIII, Title XIX, or Title XXI
77 of the Social Security Act;

78 (5) The claim payment is the subject of adjustment with another insurer, administrator, or
79 payor; or

80 (6) The claim payment is the subject of legal action.

81 The corporation shall notify a dentist at least 15 days in advance of the imposition of any
82 retroactive denials of previously paid claims. The dentist shall have 6 months from the date of
83 notification under this paragraph to determine whether the insured has other appropriate

84 insurance, which was in effect on the date of service. Notwithstanding the contractual terms
85 between the corporation and dentist, the corporation shall allow for the submission of a claim
86 that was previously denied by another insurer due to the insured's transfer or termination of
87 coverage."

88 SECTION 4. Section 21 of chapter 176G of the General Laws, as appearing in the 2008
89 Official Edition, is hereby amended by inserting after sub-section (d) the following sub-section:-

90 "(e) In this subsection "retroactive denial of a previously paid claim" means any attempt
91 by a health maintenance organization to retroactively collect payments already made to a
92 registered dentist with respect to a claim by requiring re-payment of such payments, reducing
93 other payments currently owed to the dentist, withholding or setting off against future payments,
94 or reducing or affecting the future claim payments to the dentist in any other manner. The health
95 maintenance organization shall not impose on any registered dentist any retroactive denial of a
96 previously paid claim or any part thereof unless:

97 (a) The health maintenance organization has provided the reason for the retroactive denial
98 in writing to the dentist; and

99 (b) The time which has elapsed since the date of payment of the claim does not exceed 12
100 months. The retroactive denial of a previously paid claim may be permitted beyond 12 months
101 from the date of payment only for the following reasons:

102 (1) The claim was submitted fraudulently;

103 (2) The claim payment was incorrect because the dentist or the insured was already paid
104 for the dental care services identified in the claim;

105 (3) The dental care services identified in the claim were not delivered by the dentist;

106 (4) The claim payment was for services covered by Title XVIII, Title XIX, or Title XXI
107 of the Social Security Act;

108 (5) The claim payment is the subject of adjustment with another insurer, administrator, or
109 payor; or

110 (6) The claim payment is the subject of legal action.

111 A health maintenance organization shall notify a dentist at least 15 days in advance of the
112 imposition of any retroactive denials of previously paid claims. The dentist shall have 6 months
113 from the date of notification under this paragraph to determine whether the insured has other
114 appropriate insurance, which was in effect on the date of service. Notwithstanding the
115 contractual terms between the health maintenance organization and dentist, the corporation shall
116 allow for the submission of a claim that was previously denied by another insurer due to the
117 insured's transfer or termination of coverage."

118 SECTION 5. Section 2 of chapter 176I of the General Laws, as appearing in the 2008
119 Official Edition, is hereby amended by at the end thereof the following new paragraph:-

120 "In this paragraph "retroactive denial of a previously paid claim" means any attempt by
121 an organization to retroactively collect payments already made to a registered dentist with
122 respect to a claim by requiring re-payment of such payments, reducing other payments currently
123 owed to the dentist, withholding or setting off against future payments, or reducing or affecting
124 the future claim payments to the dentist in any other manner. The organization shall not impose
125 on any registered dentist any retroactive denial of a previously paid claim or any part thereof
126 unless:

127 (a) The organization has provided the reason for the retroactive denial in writing to the
128 dentist; and

129 (b) The time which has elapsed since the date of payment of the claim does not exceed 12
130 months. The retroactive denial of a previously paid claim may be permitted beyond 12 months
131 from the date of payment only for the following reasons:

132 (1) The claim was submitted fraudulently;

133 (2) The claim payment was incorrect because the dentist or the insured was already paid
134 for the dental care services identified in the claim;

135 (3) The dental care services identified in the claim were not delivered by the dentist;

136 (4) The claim payment was for services covered by Title XVIII, Title XIX, or Title XXI
137 of the Social Security Act;

138 (5) The claim payment is the subject of adjustment with another insurer, administrator, or
139 payor; or

140 (6) The claim payment is the subject of legal action.

141 An organization shall notify a dentist at least 15 days in advance of the imposition of any
142 retroactive denials of previously paid claims. The dentist shall have 6 months from the date of
143 notification under this paragraph to determine whether the insured has other appropriate
144 insurance, which was in effect on the date of service. Notwithstanding the contractual terms
145 between the corporation and dentist, the corporation shall allow for the submission of a claim
146 that was previously denied by another insurer due to the insured's transfer or termination of
147 coverage."