sb 0354 Page 1 of 5

## SB 354 - FINAL VERSION

4/2/98 1128s

20may98....1716h

#### 1998 SESSION

98-2681

01/08

## SENATE BILL 354

AN ACT requiring insurance coverage for hospitalization and anesthesia for dental procedures for certain patients.

SPONSORS: Sen. Russman, Dist 19; Sen. Podles, Dist 16; Sen. Larsen, Dist 15; Sen. Hollingworth, Dist 23; Rep. Wallner, Merr 24; Rep. Allen, Hills 1; Rep. G. Katsakiores, Rock 13; Rep. P. Katsakiores, Rock 13; Rep. Gleason, Rock 13

COMMITTEE: Insurance

### ANALYSIS

This bill requires insurance coverage for the costs of hospitalization and anesthesia for dental procedures for certain patients.

Explanation: Matter added to current law appears in bold italics.

Matter removed from current law appears [in brackets and struckthrough.]

Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

4/2/98 1128s

20may98....1716h

98-2681

01/08

### STATE OF NEW HAMPSHIRE

In the Year of Our Lord One Thousand Nine Hundred and Ninety-Eight

sb 0354 Page 2 of 5

AN ACT requiring insurance coverage for hospitalization and anesthesia for dental procedures for certain patients.

Be it Enacted by the Senate and House of Representatives in General Court convened:

- 1 Statement of Purpose.
  - I. The general court finds that:
    - (a) Denial of medical benefits otherwise payable just because dental procedures are performed is inherently unfair when the justification for general anesthesia is the same regardless of the procedure.
    - (b) Denial of medical benefits effectively eliminates the option of general anesthesia for most families. Children and persons with disabilities suffer most. There are no comparable alternatives to general anesthesia for this group. Comparable results and outcomes are not obtained when general anesthesia is denied.
    - (c) General anesthesia is the accepted standard of care for this population group. General anesthesia for dental treatment is available under federal medicaid guidelines, but effectively unavailable for private patients. Care under general anesthesia is supported by the American Dental Association, the American Academy of Pediatric Dentistry, the American Medical Association, the U.S. Department of Health and Human Services, and most other professional dental and medical organizations.
    - (d) There is little consistency in the insurance industry concerning such benefits. Benefits are often extended to one insured and denied to others insured by the same company and even under the same policy. Policy holders are unlikely to be aware of these exclusions at the time of policy purchase. Aggressive and determined parents are sometimes able to force the payment of benefits that the majority of less well-connected, well-educated, or financially well-off parents are denied.
    - (e) Pediatric dentists estimate overwhelmingly that parental acceptance of general anesthesia would increase if artificial financial barriers were removed. When over 1500 members of the American Academy of Pediatric Dentistry responded to a 1995 survey, they reported that when general anesthesia was indicated and denied, comparable treatment results could be achieved in less than half their cases. In fully 60 percent of these cases, patients either received compromised outcomes or were denied treatment altogether.
  - II. Therefore, the general court hereby requires insurance coverage when dental care is provided under general anesthesia.

- III. This act is not intended to encourage the administration of general anesthesia in any medical setting as a substitute for sound patient management practices.
- 2 New Sections; Coverage for Dental Procedures; Medical or Hospital. Amend RSA 415 by inserting after section 18-f the following new sections:
- 415:18-g Coverage for Dental Procedures; Medical or Hospital; Group.
  - I. Each insurer that issues or renews any policy of group or blanket accident or health insurance providing benefits for medical or hospital expenses, shall provide to each group, or to the portion of each group comprised of certificate holders of such insurance who are residents of New Hampshire, coverage for the medically necessary hospital or surgical day care facility charges and administration of general anesthesia administered by a licensed anesthesiologist or anesthetist for dental procedures performed on a covered person who:
    - (a) Is a child under the age of 4 who is determined by a licensed dentist in conjunction with a licensed physician to have a dental condition of significant dental complexity which requires certain dental procedures to be performed in a surgical day care facility or hospital setting; or
    - (b) Is a person who has exceptional medical circumstances or a developmental disability as determined by a licensed physician which place the person at serious risk.
  - II. All of the terms and conditions of the covered person's policy shall apply to these services.
- 415:18-h Coverage for Dental Procedures; Dental Offices.
  - I. Each dental insurer or other similar entity, including Delta under RSA 420-F, that issues or renews any policy of group insurance providing benefits for oral surgical procedures, shall provide to each certificate holder who is a resident of New Hampshire coverage for the administration of general anesthesia administered by a licensed dentist for dental procedures performed in a dentist's office on a covered person who:
    - (a) Is a child under the age of 4 who is determined by a licensed dentist in conjunction with a licensed physician to have a dental condition of significant complexity which requires the child to receive general anesthesia for the treatment of such condition; or
    - (b) Is a person who has exceptional medical circumstances or a developmental disability as determined by a licensed physician which place the person at serious risk.

II. All of the terms and conditions of the covered person's policy shall apply to these services

3 New Section; Coverage for Dental Procedures. Amend RSA 420-A by inserting after section 17-a the following new section:

# 420-A:17-b Coverage for Dental Procedures.

- I. Every health service corporation and every similar corporation licensed under the laws of another state that issues or renews any group policy or blanket accident or health insurance providing benefits for medical or hospital expenses, shall provide to each covered individual or certificate holder who is a resident of New Hampshire coverage for the medically necessary hospital or surgical day care facility charges and administration of general anesthesia administered by a licensed anesthesiologist or anesthetist for dental procedures performed on a covered person who:
  - (a) Is a child under the age of 4 who is determined by a licensed dentist in conjunction with a licensed primary care physician to have a dental condition of significant dental complexity which requires certain dental procedures to be performed in a surgical day care facility or hospital setting; or
  - (b) Is a person who has exceptional medical circumstances or a developmental disability as determined by a licensed primary care physician which place the person at serious risk.
- II. All of the terms and conditions of the covered person's policy shall apply to these services.

4 New Section; Coverage for Dental Procedures. Amend RSA 420-B by inserting after section 8-e the following new section:

# 420-B:8-ee Coverage for Dental Procedures.

- I. Every health maintenance organization and every other similar corporation licensed under the laws of another state that issues or renews any group policy or blanket accident or health insurance providing benefits for medical or hospital expenses, shall provide to each covered individual or certificate holder who is a resident of New Hampshire coverage for the medically necessary hospital or surgical day care facility charges and administration of general anesthesia administered by a licensed anesthesiologist or anesthetist for dental procedures performed on a covered person who:
  - (a) Is a child under the age of 4 who is determined by a licensed dentist in conjunction with a licensed primary care physician to have a dental condition of significant dental complexity which requires certain dental

sb 0354 Page 5 of 5

procedures to be performed in a surgical day care facility or hospital setting; or

(b) Is a person who has exceptional medical circumstances or a developmental disability as determined by a licensed primary care physician which place the person at serious risk.

II. All of the terms and conditions of the covered person's policy shall apply to these services.

5 Report Required. The insurance department shall analyze the effect of the coverage requirements contained in this act on the overall cost of health and dental insurance in the group markets. The insurance department shall submit a report on its analysis to the president of the senate, the speaker of the house, and the governor's office by January 1, 2000.

6 Effective Date. This act shall take effect January 1, 1999.

**LBAO** 

98-2681

4/13/98

### SB 354 FISCAL NOTE

AN ACT requiring insurance coverage for hospitalization and anesthesia for dental procedures for certain patients.

### FISCAL IMPACT:

The Insurance Department indicates this bill, as amended by the Senate, may cause an indeterminable impact on state, county and local expenditures and state revenue in FY 1999 and each year thereafter. There will be no fiscal impact on county and local revenues.

#### METHODOLOGY:

The Insurance Department indicates that to the extent the state's policy for its employees does not provide these benefits there would be added expenditures. To the extent most other policies do not provide benefits, and to the extent there is an increased premium cost for the provisions of these benefits there would be an increase in the premium tax revenue collected. The Department is unable to determine how many children under four years of age would require such a benefit.