

---

---

## A BILL FOR AN ACT

RELATING TO DENTAL SERVICES.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. Chapter 432, article 1, Hawaii Revised  
2 Statutes, is amended by adding a new section to be appropriately  
3 designated and to read as follows:

4           "§432:1- Fees to providers of dental services. (a) No  
5 mutual benefit society may require, directly or indirectly, a  
6 dentist who is a participating provider to provide services to  
7 an enrolled participant at a fee set by, or at a fee subject to  
8 the approval of, the mutual benefit society unless the dental  
9 services are covered services.

10           (b) A mutual benefit society shall not include in any  
11 dental service plan, contract, or agreement with a dentist to  
12 provide covered services, any provision that sets or recommends  
13 fees for dental services that are not covered services.

14           (c) For the purposes of this section, "covered services"  
15 means dental care services for which a reimbursement is  
16 available under an enrollee's dental service plan, or for which  
17 a reimbursement would be available but for the application of  
18 contractual limitations such as deductibles, co-payments,



1 coinsurance, waiting periods, annual or lifetime maximums,  
2 frequency limitations, alternative benefit payments, or any  
3 other limitation.

4 (d) A violation of this section shall be a violation of  
5 section 480-2."

6 SECTION 2. Chapter 432D, Hawaii Revised Statutes, is  
7 amended by adding a new section to be appropriately designated  
8 and to read as follows:

9 "§432D- Fees to providers of dental services. (a) No  
10 health maintenance organization may require, directly or  
11 indirectly, a dentist who is a participating provider, to  
12 provide services to an enrolled participant at a fee set by, or  
13 at a fee subject to the approval of, the health maintenance  
14 organization unless the dental services are covered services.

15 (b) A health maintenance organization shall not include in  
16 any dental service plan, contract, or agreement with a dentist  
17 to provide covered services, any provision that sets or  
18 recommends fees for dental services that are not covered  
19 services.

20 (c) For the purposes of this section, "covered services"  
21 means dental care services for which a reimbursement is  
22 available under an enrollee's dental service plan, or for which



1 a reimbursement would be available but for the application of  
2 contractual limitations such as deductibles, co-payments,  
3 coinsurance, waiting periods, annual or lifetime maximums,  
4 frequency limitations, alternative benefit payments, or any  
5 other limitation.

6 (d) A violation of this section shall be a violation of  
7 section 480-2."

8 SECTION 3. Chapter 448D, Hawaii Revised Statutes, is  
9 amended by adding a new section to be appropriately designated  
10 and to read as follows:

11 "§448D- Fees to providers of dental services. (a) No  
12 dental service organization may require, directly or indirectly,  
13 a dentist who is a participating provider to provide services to  
14 an enrolled participant at a fee set by, or at a fee subject to  
15 the approval of, the dental service organization unless the  
16 dental services are covered services.

17 (b) A dental service organization shall not include in any  
18 dental service plan, contract, or agreement with a dentist to  
19 provide covered services, any provision that sets or recommends  
20 fees for dental services that are not covered services.

21 (c) A violation of this section shall be a violation of  
22 section 480-2."



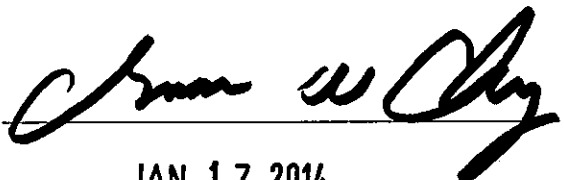
1 SECTION 4. Section 448D-1, Hawaii Revised Statutes, is  
2 amended by adding a new definition to be appropriately inserted  
3 and to read as follows:

4 "Covered services" means dental care services for which a  
5 reimbursement is available under an enrollee's dental service  
6 plan, or for which a reimbursement would be available but for  
7 the application of contractual limitations such as deductibles,  
8 co-payments, coinsurance, waiting periods, annual or lifetime  
9 maximums, frequency limitations, alternative benefit payments,  
10 or any other limitation."

11 SECTION 5. New statutory material is underscored.

12 SECTION 6. This Act shall take effect upon its approval.

13

INTRODUCED BY:   
JAN 17 2014



# H.B. NO. 1851

**Report Title:**

Dental Services; Dental Health Organizations

**Description:**

Prohibits dental service organizations, mutual benefit societies, and health maintenance organizations from requiring a dentist who provides services to its subscribers to provide services for a set fee unless they are covered services.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

