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 passage 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:-

3 "In this paragraph "retroactive denial of a previously paid claim" means any attempt by 4 an insurer to retroactively collect payments already made to a registered dentist with respect to a 5 claim by requiring re-payment of such payments, reducing other payments currently owed to the 6 dentist, withholding or setting off against future payments, or reducing or affecting the future 7 claim payments to the dentist in any other manner. The insurer shall not impose on any 8 registered dentist any retroactive denial of a previously paid claim or any part thereof unless:

9 (a) The insurer has provided the reason for the retroactive denial in writing to the dentist; 10 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:

14 (1) The claim was submitted fraudulently;

15 (2) The claim payment was incorrect because the dentist or the insured was already paid16 for the dental care services identified in the claim;

17 (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 XXI19 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.

An insurer shall notify a dentist at least 15 days in advance of the imposition of any retroactive denials of previously paid claims. The dentist shall have 6 months from the date of notification under this paragraph to determine whether the insured has other appropriate insurance, which was in effect on the date of service. Notwithstanding the contractual terms between the corporation and dentist, the corporation shall allow for the submission of a claim that was previously denied by another insurer due to the insured's transfer or termination of 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 the39 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 XXI48 of the Social Security Act;

49 (5) The claim payment is the subject of adjustment with another insurer, administrator, or50 payor; or

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

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

(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:

72 (1) The claim was submitted fraudulently;

73 (2) The claim payment was incorrect because the dentist or the insured was already paid74 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;

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

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

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

The corporation shall notify a dentist at least 15 days in advance of the imposition of any retroactive denials of previously paid claims. The dentist shall have 6 months from the date of 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 denial98 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:

102 (1) The claim was submitted fraudulently;

103 (2) The claim payment was incorrect because the dentist or the insured was already paid104 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;

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

108 (5) The claim payment is the subject of adjustment with another insurer, administrator, or109 payor; or

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

A health maintenance organization shall notify a dentist at least 15 days in advance of the imposition of any retroactive denials of previously paid claims. The dentist shall have 6 months from the date of notification under this paragraph to determine whether the insured has other appropriate insurance, which was in effect on the date of service. Notwithstanding the contractual terms between the health maintenance organization and dentist, the corporation shall allow for the submission of a claim that was previously denied by another insurer due to the insured's transfer or termination of coverage." SECTION 5. Section 2 of chapter 176I of the General Laws, as appearing in the 2008
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:

(a) The organization has provided the reason for the retroactive denial in writing to thedentist; 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:

132 (1) The claim was submitted fraudulently;

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

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

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

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

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

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