State of South Dakota

NINETY-THIRD SESSION LEGISLATIVE ASSEMBLY, 2018

929Z0132

HOUSE BILL NO. 1205

Introduced by: Representatives Heinemann, Campbell, Clark, DiSanto, Goodwin, Holmes, McCleerey, McPherson, Mills, Otten (Herman), Rasmussen, Rounds, Rozum, Schaefer, Steinhauer, and York and Senators Solano, Frerichs, Killer, Klumb, Kolbeck, Nelson, Rusch, Soholt, Tapio, White, and Youngberg

- 1 FOR AN ACT ENTITLED, An Act to require certain health benefit plans to provide coverage
- 2 to medically compromised persons for certain dental care services.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF SOUTH DAKOTA:
- 4 Section 1. That § 58-17-84.1 be amended to read:
- 5 58-17-84.1. Any health benefit plan as defined by § 58-17-63 shall cover anesthesia and
- 6 hospital or ambulatory surgery center charges for dental care provided to a covered person who:
- 7 (1) Is a child under age five; or
- 8 (2) Is severely disabled or otherwise suffers from a developmental disability as
- 9 determined by a licensed physician which places such the person at serious risk; or
- 10 (3) Is medically compromised as determined by a licensed dentist and the person's
- attending physician licensed pursuant to chapter 36-4.
- 12 Such The coverage applies to any person covered under subdivision (1) or (2) regardless of
- whether the services are provided in a hospital, ambulatory surgery center, or a dental office.
- 14 The coverage applies to a person covered under subdivision (3) only if the services are provided



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1 in a hospital or ambulatory surgery center. A health carrier may require prior authorization of

- 2 hospitalization for dental care procedures provided in a hospital or ambulatory surgery center
- 3 in the same manner that prior authorization is required for hospitalization procedures provided
- 4 in a hospital or ambulatory surgery center for other covered diseases or conditions.
- 5 Section 2. That § 58-18-45.1 be amended to read:
- 6 58-18-45.1. Any health benefit plan as defined by § 58-18-42 shall cover anesthesia and
- 7 hospital <u>or ambulatory surgery center</u> charges for dental care provided to a covered person who:
- 8 (1) Is a child under age five; or
- 9 (2) Is severely disabled or otherwise suffers from a developmental disability as
- determined by a licensed physician which places such the person at serious risk; or
- 11 (3) Is medically compromised as determined by a licensed dentist and the person's
- 12 attending physician licensed pursuant to chapter 36-4.
- 13 Such The coverage applies to any person covered under subdivision (1) or (2) regardless of
- whether the services are provided in a hospital, <u>ambulatory surgery center</u>, or a dental office.
- 15 The coverage applies to any person covered under subdivision (3) only if the services are
- 16 provided in a hospital or ambulatory surgery center. A health carrier may require prior
- 17 authorization of hospitalization for dental care procedures provided in a hospital or ambulatory
- surgery center in the same manner that prior authorization is required for hospitalization
- 19 procedures provided in a hospital or ambulatory surgery center for other covered diseases or
- 20 conditions.
- Section 3. That the code be amended by adding a NEW SECTION to read:
- 22 For the purposes of this Act, a person is medically compromised if the person is determined
- 23 to have one or more medical conditions that would create significant or undue medical risk for
- 24 the person if the dental care procedure or surgery was performed outside of a hospital or

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1 ambulatory surgery center.