HOUSE BILL No. 2307

By Committee on Health and Human Services

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AN ACT concerning insurance; relating to dental benefits; covered services and non-covered services; limitations on plan changes; amending K.S.A. 2018 Supp. 40-2,185 and 40-2,186 and repealing the existing sections.

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Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2018 Supp. 40-2,185 is hereby amended to read as follows: 40-2,185. (a) No contract issued or renewed after July 1, 2010, between a health insurer and a dentist who is a participating provider with respect to such health insurer's health benefit plan shall contain any provision—which that requires the dentist who provides any service to an insured under such health benefit plan at a fee set or prescribed by the health insurer unless such service is a covered service.

- (b) No contract issued or renewed after July 1, 2019, between a health insurer and a dentist who is a participating provider with respect to such health insurer's health benefit plan shall change the terms, discounts or rates provided therein without the concurrence and agreement at the time of such change by the dentist.
- Sec. 2. K.S.A. 2018 Supp. 40-2,186 is hereby amended to read as follows: 40-2,186. For the purposes of this act K.S.A. 40-2,185 and 40-2,186, and amendments thereto:
- (a) "Covered service" means a service—which or material that is reimbursable under the health benefit plan subject to any deductible, coinsurance, waiting period, frequency limitation, annual or lifetime benefit maximum or other contractual limitation contained in the health benefit plan. "Covered service" does not include any service or material that is covered or provided at a nominal or de minimis rate or any service or material that is not covered because of maximum coverage limitations.
- (b) "Health benefit plan"-shall have the meaning ascribed to it means the same as defined in K.S.A. 40-4602, and amendments thereto. Health benefit plan-shall also include includes:
- 32 (1) Any subscription agreement issued by a nonprofit dental service corporation.
 - (2) Any policy of health insurance purchased by an individual.
- 35 (3) To the extent permitted by law, the health insurance plan for Kansas children established pursuant to K.S.A. 38-2001 et seq., and

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amendments thereto.

- (4) To the extent permitted by law, the state medical assistance program under medicaid established pursuant to K.S.A. 39-708c, and amendments thereto.
- (c) "Health insurer"-shall have the meaning ascribed to it means the same as defined in K.S.A. 40-4602, and amendments thereto. Health-insurer shall, and also include includes a nonprofit dental service corporation as such term is used in K.S.A. 40-19a01 et seq., and amendments thereto.
- (d) "Insured"-shall have the meaning ascribed to it means the same as defined in K.S.A. 40-4602, and amendments thereto. Insured shall, and also-include includes a subscriber to a subscription agreement issued by a nonprofit dental service corporation as such term is used in K.S.A. 40-19a01 et seq., and amendments thereto.
- (e) "Participating provider"—shall have the meaning ascribed to itmeans the same as defined in in K.S.A. 40-4602, and amendments thereto—Participating provider shall, and also—include includes any dentist who has entered into a participation agreement with a nonprofit dental service corporation.
- (f) "Provider"-shall have the meaning ascribed to it means the same as defined in K.S.A. 40-4602, and amendments thereto. Provider shall, and also include includes any dentist licensed by the Kansas dental board.
 - Sec. 3. K.S.A. 2018 Supp. 40-2,185 and 40-2,186 are hereby repealed.
- Sec. 4. This act shall take effect and be in force from and after its publication in the statute book.