## CERTIFICATION OF ENROLLMENT

## ENGROSSED SUBSTITUTE HOUSE BILL 1364

Chapter 321, Laws of 2001

57th Legislature 2001 Regular Legislative Session

GENERAL ANESTHESIA SERVICES

EFFECTIVE DATE: 7/22/01

Passed by the House April 16, 2001 CERTIFICATE Yeas 94 Nays 0 We, Timothy A. Martin and Cynthia Zehnder, Co-Chief Clerks of the House FRANK CHOPP of Representatives of the State of Speaker of the House of Representatives Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE HOUSE** BILL 1364 as passed by the House of Representatives and the Senate on the CLYDE BALLARD dates hereon set forth. Speaker of the House of Representatives CYNTHIA ZEHNDER Passed by the Senate April 10, 2001 Chief Clerk Yeas 47 Nays 0 TIMOTHY A. MARTIN Chief Clerk BRAD OWEN President of the Senate Approved May 15, 2001 FILED May 15, 2001 - 2:45 p.m.

GARY LOCKE

Governor of the State of Washington

Secretary of State

State of Washington

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### ENGROSSED SUBSTITUTE HOUSE BILL 1364

## AS AMENDED BY THE SENATE

Passed Legislature - 2001 Regular Session

# State of Washington 57th Legislature 2001 Regular Session

**By** House Committee on Health Care (originally sponsored by Representatives Pflug, Edmonds, Cody, Campbell, Boldt, Doumit, Pennington and Schual-Berke)

Read first time . Referred to Committee on .

- 1 AN ACT Relating to general anesthesia services; adding a new
- 2 section to chapter 41.05 RCW; and adding a new section to chapter 48.43
- 3 RCW.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 41.05 RCW 6 to read as follows:
- 7 (1) Each employee benefit plan offered to public employees that
- 8 provides coverage for hospital, medical, or ambulatory surgery center
- 9 services must cover general anesthesia services and related facility
- 10 charges in conjunction with any dental procedure performed in a
- 11 hospital or ambulatory surgical center if such anesthesia services and
- 12 related facility charges are medically necessary because the covered
- 13 person:
- 14 (a) Is under the age of seven, or physically or developmentally
- 15 disabled, with a dental condition that cannot be safely and effectively
- 16 treated in a dental office; or
- 17 (b) Has a medical condition that the person's physician determines
- 18 would place the person at undue risk if the dental procedure were

- 1 performed in a dental office. The procedure must be approved by the 2 person's physician.
- 3 (2) Each employee benefit plan offered to public employees that 4 provides coverage for dental services must cover general anesthesia 5 services in conjunction with any covered dental procedure performed in 6 a dental office if the general anesthesia services are medically 7 necessary because the covered person is under the age of seven or 8 physically or developmentally disabled.
  - (3) This section does not prohibit an employee benefit plan from:
- 10 (a) Applying cost-sharing requirements, maximum annual benefit 11 limitations, and prior authorization requirements to the services 12 required under this section; or
- (b) Covering only those services performed by a health care provider, or in a health care facility, that is part of its provider network; nor does it limit the authority in negotiating rates and contracts with specific providers.
- 17 (4) This section does not apply to medicare supplement policies, or 18 supplemental contracts covering a specified disease or other limited 19 benefits.
- (5) For the purpose of this section, "general anesthesia services"
  means services to induce a state of unconsciousness accompanied by a
  loss of protective reflexes, including the ability to maintain an
  airway independently and respond purposefully to physical stimulation
  or verbal command.
- 25 (6) This section applies to employee benefit plans issued or 26 renewed on or after January 1, 2002.
- NEW SECTION. Sec. 2. A new section is added to chapter 48.43 RCW to read as follows:
- (1) Each group health benefit plan that provides coverage for hospital, medical, or ambulatory surgery center services must cover general anesthesia services and related facility charges in conjunction with any dental procedure performed in a hospital or ambulatory surgical center if such anesthesia services and related facility charges are medically necessary because the covered person:
- 35 (a) Is under the age of seven, or physically or developmentally 36 disabled, with a dental condition that cannot be safely and effectively 37 treated in a dental office; or

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- 1 (b) Has a medical condition that the person's physician determines 2 would place the person at undue risk if the dental procedure were 3 performed in a dental office. The procedure must be approved by the 4 person's physician.
- 5 (2) Each group health benefit plan or group dental plan that 6 provides coverage for dental services must cover medically necessary 7 general anesthesia services in conjunction with any covered dental 8 procedure performed in a dental office if the general anesthesia 9 services are medically necessary because the covered person is under 10 the age of seven or physically or developmentally disabled.
- 11 (3) This section does not prohibit a group health benefit plan or 12 group dental plan from:
- 13 (a) Applying cost-sharing requirements, maximum annual benefit 14 limitations, and prior authorization requirements to the services 15 required under this section; or
- (b) Covering only those services performed by a health care provider, or in a health care facility, that is part of its provider network; nor does it limit the health carrier in negotiating rates and contracts with specific providers.
- 20 (4) This section does not apply to medicare supplement policies, or 21 supplemental contracts covering a specified disease or other limited 22 benefits.
- (5) For the purpose of this section, "general anesthesia services"
  means services to induce a state of unconsciousness accompanied by a
  loss of protective reflexes, including the ability to maintain an
  airway independently and respond purposefully to physical stimulation
  or verbal command.
- 28 (6) This section applies to group health benefit plans and group 29 dental plans issued or renewed on or after January 1, 2002.

Passed the House April 16, 2001. Passed the Senate April 10, 2001. Approved by the Governor May 15, 2001. Filed in Office of Secretary of State May 15, 2001.