

# HOUSE BILL REPORT

## SHB 2686

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### As Amended by the Senate

**Title:** An act relating to fees for dental services that are not covered services under dental insurance or dental health care service contracts.

**Brief Description:** Concerning fees for dental services that are not covered by insurance or contract.

**Sponsors:** House Committee on Health Care & Wellness (originally sponsored by Representatives Driscoll, Hinkle, Condotta, Moeller and Goodman).

#### **Brief History:**

##### **Committee Activity:**

Health Care & Wellness: 1/21/10, 1/29/10 [DPS].

##### **Floor Activity:**

Passed House: 2/10/10, 97-0.

Senate Amended.

Passed Senate: 3/2/10, 45-1.

#### **Brief Summary of Substitute Bill**

- Prohibits insurers from setting or requiring approval of out-of-plan dental service fees.

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### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 13 members: Representatives Cody, Chair; Driscoll, Vice Chair; Ericksen, Ranking Minority Member; Bailey, Campbell, Clibborn, Green, Herrera, Hinkle, Kelley, Moeller, Morrell and Pedersen.

**Staff:** Dave Knutson (786-7146).

#### **Background:**

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

Washington Dental Services notified participating dentists it was changing provider contract provisions to allow it to limit fees charged by contracted dentists for dental services not covered by the insurer's dental plans.

**Summary of Substitute Bill:**

Disability insurers and health care service contractors are prohibited from requiring a contracting dentist to provide services to a subscriber at a fee set by, or subject to, the approval of the insurer, unless the dental services are covered services under the applicable contract. Covered services include services that would be reimbursable but for the application of contractual limitations such as benefit maximums, deductibles, coinsurance, waiting periods, or frequency limitations, they will be exempt from the prohibition.

**EFFECT OF SENATE AMENDMENT(S):**

Additional references to deductibles and coinsurance are inserted in each section to ensure language is consistent with the definition of covered services.

**Appropriation:** None.

**Fiscal Note:** Not requested.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony:**

(In support) It is unfair for a carrier to force a dental provider to follow a fee schedule if the service is not considered a covered service under the applicable contract.

(Opposed) Please don't cut dental services for people with disabilities. Dental, vision, hearing, and medical supplies are all very important to people with disabilities and should not be cut.

**Persons Testifying:** (In support) Representative Driscoll, prime sponsor; and David Hemion, Washington State Dental Association.

(Opposed) Cherie Tessier.

**Persons Signed In To Testify But Not Testifying:** None.