# STATE OF NEW YORK

6496--A

2017-2018 Regular Sessions

# IN SENATE

May 25, 2017

Introduced by Sen. O'MARA -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the insurance law, in relation to discounting uninsured dental services

**The People of the State of New York, represented in Senate and Assembly, do enact as follows:**

Section 1. Section 4224 of the insurance law is amended by adding a new subsection (g) to read as follows:

**(g) Notwithstanding any other provision of this section, no insurer or managed care entity authorized to do business in this state shall include any provision in any of its contracts with a dentist which requires that a dentist provide services to a covered person at a fee set by, or at a fee subject to the approval of, the insurer or managed care entity unless the dental services are a covered service under the person's dental plan. For purposes of this subsection, "covered services" shall mean dental care services for which a reimbursement is available under an enrollee's plan contract, or for which a reimbursement would be available but for the application of contractual limitations such as deductibles, copayments, coinsurance, waiting periods, annual or lifetime maximums, frequency limitations, alternative benefit payments, or any other limitation.**

§ 2. This act shall take effect on January 1, 2018, and shall apply to all insurance and managed care contracts issued or entered into on or after January 1, 2018.

EXPLANATION--Matter in *italics* (underscored) is new; matter in brackets [-] is old law to be omitted.

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