

CHAPTER 162

INSURANCE

HOUSE BILL 98-1243

BY REPRESENTATIVES Lawrence, K. Alexander, Musgrave, Chavez, Clarke, Mace, Saliman, Snyder, and Tool;
also SENATORS Hopper, Hernandez, Linkhart, Pascoe, Rupert, and Thiebaud.

AN ACT

CONCERNING REQUIRED HEALTH CARE COVERAGE FOR MEDICAL COSTS ASSOCIATED WITH THE
ADMINISTRATION OF GENERAL ANESTHESIA FOR DENTAL PROCEDURES PERFORMED ON DEPENDENT
CHILDREN.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. Legislative declaration. The general assembly finds, determines, and declares that dental treatment for certain children is imperative to maintain their health. Occasionally, it is necessary for dentists to utilize anesthesia to perform dental treatment on very young, disabled, or medically compromised children. However, as it is usually not an included benefit of the child's medical or dental insurance coverage, either the parents are left with the incurred expenses, or the treatment is not performed at the expense of the child's health. The general assembly further finds, determines, and declares that mandatory insurance coverage for anesthesia for dental treatment is essential to ensure that all children receive the dental treatment they need to maintain good health.

SECTION 2. 10-16-104, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SUBSECTION to read:

10-16-104. Mandatory coverage provisions. (12) Hospitalization and general anesthesia for dental procedures for dependent children. (a) ALL INDIVIDUAL AND ALL GROUP SICKNESS AND ACCIDENT INSURANCE POLICIES THAT ARE DELIVERED OR ISSUED FOR DELIVERY WITHIN THE STATE BY AN ENTITY SUBJECT TO THE PROVISIONS OF PART 2 OF THIS ARTICLE AND ALL INDIVIDUAL AND GROUP HEALTH CARE SERVICE OR INDEMNITY CONTRACTS ISSUED BY AN ENTITY SUBJECT TO THE PROVISIONS OF PART 3 OR 4 OF THIS ARTICLE EXCEPT SUPPLEMENTAL POLICIES THAT COVER A SPECIFIC DISEASE OR OTHER LIMITED BENEFIT SHALL PROVIDE COVERAGES FOR GENERAL ANESTHESIA WHEN RENDERED IN A HOSPITAL, OUTPATIENT SURGICAL

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

FACILITY, OR OTHER FACILITY LICENSED PURSUANT TO SECTION 25-3-101, C.R.S., AND FOR ASSOCIATED HOSPITAL OR FACILITY CHARGES FOR DENTAL CARE PROVIDED TO A DEPENDENT CHILD, AS DEPENDANT IS DEFINED IN SECTION 10-16-102 (14), OF A COVERED PERSON. SUCH DEPENDENT CHILD SHALL, IN THE TREATING DENTIST'S OPINION, SATISFY ONE OR MORE OF THE FOLLOWING CRITERIA:

(I) THE CHILD HAS A PHYSICAL, MENTAL, OR MEDICALLY COMPROMISING CONDITION; OR

(II) THE CHILD HAS DENTAL NEEDS FOR WHICH LOCAL ANESTHESIA IS INEFFECTIVE BECAUSE OF ACUTE INFECTION, ANATOMIC VARIATIONS, OR ALLERGY; OR

(III) THE CHILD IS AN EXTREMELY UNCOOPERATIVE, UNMANAGEABLE, ANXIOUS, OR UNCOMMUNICATIVE CHILD OR ADOLESCENT WITH DENTAL NEEDS DEEMED SUFFICIENTLY IMPORTANT THAT DENTAL CARE CANNOT BE DEFERRED; OR

(IV) THE CHILD HAS SUSTAINED EXTENSIVE OROFACIAL AND DENTAL TRAUMA.

(b) A CARRIER MAY:

(I) REQUIRE PRIOR AUTHORIZATION FOR GENERAL ANESTHESIA AND OUTPATIENT SURGICAL FACILITIES OR HOSPITALIZATION FOR DENTAL CARE PROCEDURES IN THE SAME MANNER THAT PRIOR AUTHORIZATION IS REQUIRED FOR HOSPITALIZATION FOR OTHER COVERED DISEASES OR CONDITIONS; AND

(II) REQUIRE THAT IF COVERAGE IS PROVIDED THROUGH A MANAGED CARE PLAN, THE BENEFITS MANDATED PURSUANT TO THIS SUBSECTION (12) SHALL BE COVERED BENEFITS ONLY IF THE SERVICES ARE RENDERED BY A PROVIDER WHO IS DESIGNATED BY AND AFFILIATED WITH THE CARRIER; AND

(III) RESTRICT COVERAGE TO INCLUDE ANESTHESIA PROVIDED BY AN ANESTHESIA PROVIDER ONLY DURING PROCEDURES PERFORMED BY AN EDUCATIONALLY QUALIFIED SPECIALIST IN PEDIATRIC DENTISTRY OR OTHER DENTIST EDUCATIONALLY QUALIFIED IN A RECOGNIZED DENTAL SPECIALTY FOR WHICH HOSPITAL PRIVILEGES ARE GRANTED OR WHO IS CERTIFIED BY VIRTUE OF COMPLETION OF AN ACCREDITED PROGRAM OF POST-GRADUATE HOSPITAL TRAINING TO BE GRANTED HOSPITAL PRIVILEGES.

(c) THE PROVISIONS OF THIS SUBSECTION (12) SHALL NOT APPLY TO TREATMENT RENDERED FOR TEMPORAL MANDIBULAR JOINT (TMJ) DISORDERS.

SECTION 3. Effective date - applicability. (1) This act shall take effect on September 1, 1998; except that, if a referendum petition is filed against this act or an item, section, or part of this act within the ninety-day period after final adjournment of the general assembly that is allowed for submitting a referendum petition pursuant to article V, section 1 (3) of the state constitution, then the act, item, section, or part, if approved by the people, shall take effect on the date of the official declaration of the vote thereon by proclamation of the governor.

(2) The provisions of this act shall apply to all individual and all group sickness and accident insurance policies that are delivered or issued for delivery within the state by an entity subject to the provisions of part 2 of article 16 of title 10, Colorado Revised Statutes, and all individual and group health care service or indemnity contracts issued, renewed, or reinstated by an entity subject to the provisions of part 3 or 4 of article 16 of title 10, Colorado Revised Statutes, on or after the effective date of this act.

Approved: April 22, 1998