

HOUSE BILL No. 5839

February 17, 2010, Introduced by Rep. Marleau and referred to the Committee on Insurance.

A bill to amend 1956 PA 218, entitled
"The insurance code of 1956,"
(MCL 500.100 to 500.8302) by adding section 3406s.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 SEC. 3406S. (1) AN EXPENSE-INCURRED HOSPITAL, MEDICAL, OR
2 SURGICAL POLICY OR CERTIFICATE DELIVERED, ISSUED FOR DELIVERY, OR
3 RENEWED IN THIS STATE THAT PROVIDES DENTAL COVERAGE AND A HEALTH
4 MAINTENANCE ORGANIZATION INDIVIDUAL OR GROUP CONTRACT THAT PROVIDES
5 DENTAL COVERAGE SHALL NOT REQUIRE THAT SERVICES PROVIDED BY A
6 DENTIST BE PROVIDED AT A FEE SET BY THE INSURER OR HEALTH
7 MAINTENANCE ORGANIZATION, EXCEPT FOR COVERED SERVICES PROVIDED TO A
8 COVERED INDIVIDUAL UNDER THE POLICY, CERTIFICATE, OR CONTRACT.

9 (2) AN INSURER AND A HEALTH MAINTENANCE ORGANIZATION SHALL NOT
10 IMPOSE A DEDUCTIBLE, COPAYMENT, COINSURANCE, OR ANY OTHER

1 REQUIREMENT IN SUCH A WAY AS TO PROVIDE DE MINIMIS REIMBURSEMENT
2 AND AVOID THE IMPACT OF THIS SECTION. THE COMMISSIONER SHALL
3 INVESTIGATE AND ISSUE A RULING ON ALL COMPLAINTS ARISING UNDER THIS
4 SECTION.

5 (3) AS USED IN THIS SECTION, "COVERED SERVICES" MEANS THOSE
6 HEALTH CARE SERVICES FOR WHICH REIMBURSEMENT IS AVAILABLE UNDER THE
7 POLICY, CERTIFICATE, OR CONTRACT AND THOSE HEALTH CARE SERVICES FOR
8 WHICH REIMBURSEMENT IS NOT AVAILABLE DUE ONLY TO AN UNEXPIRED
9 WAITING PERIOD, AN ANNUAL OR LIFETIME LIMITATION, MONETARY OR
10 FREQUENCY LIMITATION, OR OTHER LIMITATION APPLICABLE TO THE
11 COVERAGE FOR THE SERVICE. COVERED SERVICES DO NOT INCLUDE ANY OF
12 THE FOLLOWING:

13 (A) A SERVICE SELECTED BY THE PATIENT REQUIRING THE USE OF
14 MATERIAL DIFFERENT THAN THOSE COVERED BY THE POLICY, CERTIFICATE,
15 OR CONTRACT AND WITH A COST HIGHER THAN THE AMOUNT THE POLICY,
16 CERTIFICATE, OR CONTRACT WOULD PROVIDE FOR REIMBURSEMENT FOR THAT
17 SERVICE, PROVIDED THAT THE DENTIST HAS REQUESTED THE PATIENT TO PAY
18 THE AMOUNT BY WHICH THE COST OF THE SERVICE EXCEEDS REIMBURSEMENT
19 UNDER THE POLICY, CERTIFICATE, OR CONTRACT AND THE PATIENT HAS
20 AGREED TO PAY THE EXCESS TO THE DENTIST.

21 (B) A SERVICE SUBJECT TO A COPAYMENT OBLIGATION GREATER THAN
22 50%.

23 (C) A SERVICE SUBJECT TO THE SATISFACTION OF A DEDUCTIBLE
24 AMOUNT GREATER THAN \$20.00 PER SERVICE OR ANY ANNUAL OR OTHER
25 DEDUCTIBLE AMOUNT THAT THE INSURER OR HEALTH MAINTENANCE
26 ORGANIZATION REASONABLY KNOWS WILL NOT BE MET BY AT LEAST 50% OF
27 THOSE SUBJECT TO THE DEDUCTIBLE REQUIREMENT.

1 Enacting section 1. This amendatory act applies to a policy,
2 certificate, or contract entered into after the date this
3 amendatory act is enacted into law. For a policy, certificate, or
4 contract in effect on or before the date this amendatory act is
5 enacted into law, this amendatory act applies on the date the
6 policy, certificate, or contract is next extended, renewed, or
7 modified in any manner.