



General Assembly

January Session, 2007

Committee Bill No. 230

LCO No. 5441

05441SB00230INS

Referred to Committee on Insurance and Real Estate

Introduced by:
(INS)

**AN ACT CONCERNING ASSIGNMENT OF BENEFITS TO A
PHYSICIAN.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 38a-491b of the general statutes is repealed and
2 the following is substituted in lieu thereof (*Effective October 1, 2007*):

3 No insurer, health care center, hospital and medical service
4 corporation or other entity delivering, issuing for delivery, renewing,
5 continuing or amending any individual health insurance policy in this
6 state on or after July 1, 2000, providing coverage of the type specified
7 in subdivisions (1), (2), (4), (11) and (12) of section 38a-469, and no
8 dental services plan offering or administering dental services may
9 refuse to accept or make reimbursement pursuant to an assignment of
10 benefits made to a dentist or oral surgeon by an insured, subscriber or
11 enrollee, provided (1) the dentist or oral surgeon charges the insured,
12 subscriber or enrollee no more for services than the dentist or surgeon
13 charges uninsured patients for the same services, and (2) the dentist or
14 oral surgeon allows the insurer, health care center, corporation or
15 entity to review the records related to the insured, subscriber or
16 enrollee during regular business hours. The insurer, health care center,

17 corporation or entity shall give the dentist or oral surgeon at least
18 forty-eight hours' notice prior to such review. As used in this section,
19 "assignment of benefits" means the transfer of dental care coverage
20 reimbursement benefits or other rights under an insurance policy,
21 subscription contract or dental services plan by an insured, subscriber
22 or enrollee to a dentist, [or] oral surgeon or physician.

23 Sec. 2. Section 38a-517b of the general statutes is repealed and the
24 following is substituted in lieu thereof (*Effective October 1, 2007*):

25 No insurer, health care center, hospital and medical service
26 corporation or other entity delivering, issuing for delivery, renewing,
27 continuing or amending any group health insurance policy in this state
28 on or after July 1, 2000, providing coverage of the type specified in
29 subdivisions (1), (2), (4), (11) and (12) of section 38a-469, and no dental
30 services plan offering or administering dental services may refuse to
31 accept or make reimbursement pursuant to an assignment of benefits
32 made to a dentist or oral surgeon by an insured, subscriber or enrollee,
33 provided (1) the dentist or oral surgeon charges the insured, subscriber
34 or enrollee no more for services than the dentist or surgeon charges
35 uninsured patients for the same services, and (2) the dentist or oral
36 surgeon allows the insurer, health care center, corporation or entity to
37 review the records related to the insured, subscriber or enrollee during
38 regular business hours. The insurer, health care center, corporation or
39 entity shall give the dentist or oral surgeon at least forty-eight hours'
40 notice prior to such review. As used in this section, "assignment of
41 benefits" means the transfer of dental care coverage reimbursement
42 benefits or other rights under an insurance policy, subscription
43 contract or dental services plan by an insured, subscriber or enrollee to
44 a dentist, [or] oral surgeon or physician.

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>October 1, 2007</i>	38a-491b
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Sec. 2	October 1, 2007	38a-517b
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Statement of Purpose:

To require health insurers to honor an assignment of benefits made by an insured, subscriber or enrollee to a physician.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

Co-Sponsors: SEN. CRISCO, 17th Dist.

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