

REPORT OF CONFERENCE COMMITTEE

MR. SPEAKER AND MR. PRESIDENT:

We, the undersigned conferees, have had under consideration the amendments to the following entitled **BILL**:

H.B. No. 1067: Health insurance policies; require coverage for certain benefits for anesthesia for dental treatment.

We, therefore, respectfully submit the following report and recommendation:

1. That the Senate recede from its Amendment No. 1.
2. That the House and Senate adopt the following amendment:

Amend by striking all after the enacting clause and inserting in lieu thereof the following:

5 SECTION 1. Every hospital, health or medical expenses
6 insurance policy, hospital or medical service contract, health
7 maintenance organization and preferred provider organization that
8 is delivered or issued for delivery in this state and otherwise
9 provides anesthesia benefits shall offer benefits for anesthesia
10 and for associated facility charges when the mental or physical
11 condition of the child or mentally handicapped adult requires
12 dental treatment to be rendered under physician-supervised general
13 anesthesia in a hospital setting, surgical center or dental
14 office. This coverage shall be offered on an optional basis, and
15 each primary insured must accept or reject such coverage in
16 writing and accept responsibility for premium payment.

17 An insurer may require prior authorization for the anesthesia
18 and associated facility charges for dental care procedures in the
19 same manner that prior authorization is required for treatment of
20 other medical conditions under general anesthesia. An insurer may
21 require review for medical necessity and may limit payment of
22 facility charges to certified facilities in the same manner that
23 medical review is required and payment of facility charges is
24 limited for other services. The benefit provided by this coverage
25 shall be subject to the same annual deductibles or coinsurance
26 established for all other covered benefits within a given policy,
27 plan or contract. Private third party payers may not reduce or

28 eliminate coverage due to these requirements.

29 A dentist shall consider the Indications for General
30 Anesthesia as published in the reference manual of the American
31 Academy of Pediatric Dentistry as utilization standards for
32 determining whether performing dental procedures necessary to
33 treat the particular condition or conditions of the patient under
34 general anesthesia constitutes appropriate treatment.

35 The provisions of this section shall apply to anesthesia
36 services provided by oral and maxillofacial surgeons as permitted
37 by the Mississippi State Board of Dental Examiners.

38 The provisions of this section shall not apply to treatment
39 rendered for temporal mandibular joint (TMJ) disorders.

40 SECTION 2. This act shall take effect and be in force from
41 and after July 1, 1999.

**Further, amend by striking the title in its entirety and
inserting in lieu thereof the following:**

1 AN ACT TO REQUIRE THAT CERTAIN INSURANCE POLICIES AND PLANS
2 OFFER MEDICAL BENEFITS WHEN DENTAL CARE IS PROVIDED UNDER
3 PHYSICIAN-SUPERVISED GENERAL ANESTHESIA; AND FOR RELATED PURPOSES.

CONFEREES FOR THE HOUSE:

CONFEREES FOR THE SENATE:

X _____
Mary Ann Stevens

X _____
Dean Kirby

X _____
Andrew Ketchings

X _____
Alan Nunnelee

X _____
Mary H. Coleman

X _____
Bob M. Dearing