AN ACT concerning insurance; relating to health benefit plans that provide dental services; establishing new requirements relating to information disclosure and claims processing.

Be it enacted by the Legislature of the State of Kansas:

Section 1. (a) Each health insurer's health benefit plan that provides dental services and that is delivered, issued for delivery, amended or renewed by a health insurer on or after July 1, 2017, shall:

(1) Provide information regarding the insured's or beneficiary's dental benefit coverage to any dentist or dental office designated by the insured;

(2) make available, to its insured or beneficiaries, benefit maximum payment schedules; and

(3) accept claims formatted or transmitted in any manner authorized by law.

(b) For purposes of this section:

(1) "Health benefit plan" shall have the meaning ascribed to it in K.S.A. 40-4602, and amendments thereto. "Health benefit plan" shall also include any subscription agreement issued by a nonprofit dental service corporation.

(2) "Health insurer" shall have the meaning ascribed to it in K.S.A. 40-4602, and amendments thereto. "Health insurer" shall also include a nonprofit dental service corporation, as such term is used in the nonprofit dental service corporation act.

(3) "Insured" shall have the meaning ascribed to it in K.S.A. 40-4602, and amendments thereto. "Insured" shall also include a subscriber to a subscription agreement issued by a nonprofit dental service corporation, as such term is used in the nonprofit dental service corporation act.

(4) "Provider" shall have the meaning ascribed to it in K.S.A. 40-4602, and amendments thereto. "Provider" shall also include any dentist licensed by the Kansas dental board.

Sec. 2. This act shall take effect and be in force from and after its publication in the statute book.