

ASSEMBLY, No. 2546

STATE OF NEW JERSEY 220th LEGISLATURE

INTRODUCED FEBRUARY 14, 2022

Sponsored by:

Assemblywoman CAROL A. MURPHY

District 7 (Burlington)

SYNOPSIS

Requires insurance carriers offering dental benefit plans to provide certain level of coverage and reimbursement.

CURRENT VERSION OF TEXT

As introduced.



1 AN ACT concerning certain dental benefit plans and supplementing
2 P.L.2014, c.70 (C.26:2S-26 et seq.).

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4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

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7 1. a. A dental plan offered by a carrier in this State shall
8 provide for a level of coverage that is designed to provide benefits
9 that are actuarially equivalent to an amount of the full actuarial
10 value of the benefits provided under the plan that shall be
11 determined by the Commissioner of Banking and Insurance.

12 b. The level of coverage of a dental plan shall be determined on
13 the basis that the covered services are provided to a standard
14 population, and without regard to the actual population to which the
15 plan may provide benefits.

16 c. The commissioner shall develop guidelines to provide for a
17 de minimis variation in the actuarial calculations used in
18 determining the level of coverage of a dental plan to account for
19 differences in actuarial estimates.

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21 2. a. A dental plan offered by a carrier in this State shall
22 provide for reimbursement to a provider for a covered service at a
23 level that is at least 75 percent of the usual and customary charge
24 for the service provided, as determined pursuant to subsection b. of
25 this section.

26 b. The commissioner shall develop procedures for the
27 determination of the usual and customary charges for dental
28 services on a regional basis within the State. Determinations for the
29 usual and customary charges for dental services shall be made, at a
30 minimum, for three areas within the State, including the northern,
31 central, and southern portions of the State.

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33 3. This act shall take effect on the first day of the third month
34 next following the date of enactment, and shall apply to dental plans
35 delivered, issued, executed, or renewed after that date.

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STATEMENT

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40 This bill requires insurance carriers offering dental benefit plans
41 to provide covered persons with a certain level of coverage for
42 covered services. Specifically, the bill requires dental plans offered
43 by insurance carriers in this State to provide for a level of coverage
44 that is designed to provide benefits that are actuarially equivalent to
45 an amount of the full actuarial value of the benefits provided under
46 the plan that shall be determined by the Commissioner of Banking
47 and Insurance.

A2546 MURPHY

1 The bill provides that the level of coverage of a dental plan is to
2 be determined on the basis that the covered services are provided to
3 a standard population, and without regard to the actual population
4 to which the plan may provide benefits.

5 The bill requires the Commissioner of Banking and Insurance to
6 develop guidelines to provide for a de minimis variation in the
7 actuarial calculations used in determining the level of coverage of a
8 plan to account for differences in actuarial estimates.

9 The bill also requires a dental plan offered by a carrier in this
10 State to provide for reimbursement to a provider for a covered
11 service at a level that is at least 75 percent of the usual and
12 customary charge for the service provided.

13 The bill requires the Commissioner of Banking and Insurance to
14 develop procedures for the determination of the usual and
15 customary charge for dental services on a regional basis within the
16 State. Determinations for reimbursement of dental services are
17 required to be made, at a minimum, for three areas within the State,
18 including the northern, central, and southern portions of the State.