

HB3323



101ST GENERAL ASSEMBLY

State of Illinois

2019 and 2020

HB3323

by Rep. Kambium Buckner

SYNOPSIS AS INTRODUCED:

New Act

Creates the Uniform Dental Electronic Transactions Act. Provides that the Act applies to all dental plan carriers. Requires all dental plan carriers and dental care providers to exchange claims and eligibility information electronically using the transactions, companion guides, implementation guides, and timelines required under the Act in order to be compensable by the dental plan carrier. Provides that no dental plan carrier or provider may add to or modify the uniform companion guides. Grants the Director of Insurance the right to investigate complaints filed under the Act. Provides the required specifications of any complaint filed. Provides that the Director may impose a civil monetary penalty if the Director determines that there has been a violation of the Act. Requires the Department of Insurance to adopt rules. Defines terms. Effective immediately.

LRB101 08700 RAB 53785 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the
5 Uniform Dental Electronic Transactions Act.

6 Section 5. Purpose. The purpose of this Act is to
7 standardize the forms used in the billing and reimbursement of
8 dental care, reduce the number of forms used, increase
9 efficiency in the reimbursement of dental care through
10 standardization, and encourage the use of and prescribe a
11 timetable for implementation of electronic data interchange of
12 dental care expenses and reimbursement.

13 Section 10. Applicability. Except as may be otherwise
14 specifically provided, this Act applies to all dental plan
15 carriers.

16 Section 15. Definitions. As used in this Act:

17 "Dental care provider" means either a general dentist or a
18 dentist who is a licensed specialist.

19 "Dental plan carrier" means an entity subject to the
20 insurance laws and regulations of this State or subject to the
21 jurisdiction of the Director that contracts or offers to

1 contract to provide, deliver, arrange for, pay for, or
2 reimburse any of the costs of dental care services, including
3 an accident and health insurance company, a health maintenance
4 organization, or any other entity providing a plan of dental
5 insurance, dental benefits, or dental health care services.

6 "Dental plan carrier" includes limited health service
7 organizations, dental service plans, and voluntary health
8 service plans.

9 "Dental plan carrier" does not include employee or employer
10 self-insured dental benefit plans under the federal Employee
11 Retirement Income Security Act of 1974.

12 "Dentist" means a person licensed to practice dentistry in
13 any state.

14 "Department" means the Department of Insurance.

15 "Director" means the Director of Insurance.

16 Section 20. Uniform electronic claims and eligibility
17 transactions required.

18 (a) Beginning January 1, 2020, no dental plan carrier is
19 required to accept from a dental care provider eligibility for
20 a dental plan transaction or dental care claims or equivalent
21 encounter information transaction except as provided in this
22 Act.

23 (b) Beginning January 1, 2020, all dental plan carriers
24 shall accept from dental care providers eligibility for a
25 dental plan transaction described under the Code of Federal

1 Regulations, title 45, part 162, subpart L and the dental care
2 claims or equivalent encounter information transaction
3 described under the Code of Federal Regulations, title 45, part
4 162, subpart K.

5 (c) Beginning January 1, 2020, all dental plan carriers
6 shall transmit to dental care providers the eligibility for a
7 dental plan as set forth in the Code of Federal Regulations,
8 title 45, part 162, subpart L and the dental care payment and
9 remittance advice transaction set forth in the Code of Federal
10 Regulations, title 45, part 162, subpart P.

11 (d) All dental plan carriers and dental care providers must
12 exchange claims and eligibility information electronically
13 using the transactions, companion guides, implementation
14 guides, and timelines required under this Act in order to be
15 compensable by the dental plan carrier.

16 (e) Each of the transactions described in subsection (a)
17 through (d) shall require the use of a single, uniform
18 companion guide to the implementation guides described in the
19 Code of Federal Regulations, title 45, part 162.

20 Section 25. Establishing uniform, standard companion
21 guides.

22 (a) The Department shall adopt rules as necessary to
23 implement this Act, including the use of the uniform, standard
24 companion guides required under subsection (e) of Section 20.

25 (b) A dental plan carrier or dental care provider may not

1 add to or modify the uniform companion guides.

2 (c) In adopting the rules under this Section, the
3 Department shall not require data content that is not essential
4 to accomplish the purpose of the transactions in Section 20.

5 Section 30. Compliance and investigations. The Director
6 has the right to investigate complaints filed under this Act.

7 Complaints filed under this Section must:

8 (1) be filed in writing, either on paper or
9 electronically;

10 (2) name the person that is the subject of the
11 complaint and describe the acts or omissions believed to be
12 in violation of this Act; and

13 (3) be filed within 180 days after the complainant knew
14 or should have known that the act or omission complained of
15 occurred.

16 The Director may prescribe additional procedures for the
17 filing of complaints as required to satisfy the requirements of
18 this Section.

19 The Director may impose a civil monetary penalty if the
20 Director determines that there has been a violation of this
21 Act.

22 Section 99. Effective date. This Act takes effect upon
23 becoming law.