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AN ACT

RELATING TO INSURANCE; REQUIRING INSURANCE COVERAGE FOR  
GENERAL ANESTHESIA AND HOSPITALIZATION FOR DENTAL SURGERY.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. A new section of the Health Care Purchasing  
Act is enacted to read:

"GENERAL ANESTHESIA AND HOSPITALIZATION FOR DENTAL  
SURGERY.--

A. Group health care coverage, including any form  
of self-insurance, offered, issued or renewed under the  
Health Care Purchasing Act shall provide coverage for  
hospitalization and general anesthesia provided in a hospital  
or ambulatory surgical center for dental surgery for the  
following:

(1) insureds exhibiting physical,  
intellectual or medically compromising conditions for which  
dental treatment under local anesthesia, with or without  
additional adjunctive techniques and modalities, cannot be  
expected to provide a successful result and for which dental  
treatment under general anesthesia can be expected to produce  
superior results;

(2) insureds for whom local anesthesia is  
ineffective because of acute infection, anatomic variation or  
allergy;

1 (3) insured children or adolescents who are  
2 extremely uncooperative, fearful, anxious or uncommunicative  
3 with dental needs of such magnitude that treatment should not  
4 be postponed or deferred and for whom lack of treatment can  
5 be expected to result in dental or oral pain or infection,  
6 loss of teeth or other increased oral or dental morbidity;

7 (4) insureds with extensive oral-facial or  
8 dental trauma for which treatment under local anesthesia  
9 would be ineffective or compromised; or

10 (5) other procedures for which  
11 hospitalization or general anesthesia in a hospital or  
12 ambulatory surgical center is medically necessary.

13 B. The provisions of this section do not apply to  
14 short-term travel, accident-only or limited or specified  
15 disease policies.

16 C. Coverage for dental surgery may be subject to  
17 copayments, deductibles and coinsurance subject to network  
18 and prior authorization requirements consistent with those  
19 imposed on other benefits under the same group health care  
20 coverage, including any form of self-insurance."

21 Section 2. A new section of Chapter 59A, Article 22  
22 NMSA 1978 is enacted to read:

23 "GENERAL ANESTHESIA AND HOSPITALIZATION FOR DENTAL  
24 SURGERY.--

25 A. An individual or group health insurance policy, SCORC/SB 776  
Page 2

1 health care plan or certificate of health insurance that is  
2 delivered, issued for delivery or renewed in this state shall  
3 provide coverage for hospitalization and general anesthesia  
4 provided in a hospital or ambulatory surgical center for  
5 dental surgery for the following:

6 (1) insureds exhibiting physical,  
7 intellectual or medically compromising conditions for which  
8 dental treatment under local anesthesia, with or without  
9 additional adjunctive techniques and modalities, cannot be  
10 expected to provide a successful result and for which dental  
11 treatment under general anesthesia can be expected to produce  
12 superior results;

13 (2) insureds for whom local anesthesia is  
14 ineffective because of acute infection, anatomic variation or  
15 allergy;

16 (3) insured children or adolescents who are  
17 extremely uncooperative, fearful, anxious or uncommunicative  
18 with dental needs of such magnitude that treatment should not  
19 be postponed or deferred and for whom lack of treatment can  
20 be expected to result in dental or oral pain or infection,  
21 loss of teeth or other increased oral or dental morbidity;

22 (4) insureds with extensive oral-facial or  
23 dental trauma for which treatment under local anesthesia  
24 would be ineffective or compromised; or

25 (5) other procedures for which

1 hospitalization or general anesthesia in a hospital or  
2 ambulatory surgical center is medically necessary.

3 B. The provisions of this section do not apply to  
4 short-term travel, accident-only or limited or specified  
5 disease policies.

6 C. Coverage for dental surgery may be subject to  
7 copayments, deductibles and coinsurance subject to network  
8 and prior authorization requirements consistent with those  
9 imposed on other benefits under the same policy, plan or  
10 certificate."

11 Section 3. A new section of Chapter 59A, Article 23  
12 NMSA 1978 is enacted to read:

13 "GENERAL ANESTHESIA AND HOSPITALIZATION FOR DENTAL  
14 SURGERY.--

15 A. A blanket or group health insurance policy,  
16 health care plan or certificate of health insurance that is  
17 delivered, issued for delivery or renewed in this state shall  
18 provide coverage for hospitalization and general anesthesia  
19 provided in a hospital or ambulatory surgical center for  
20 dental surgery for the following:

21 (1) insureds exhibiting physical,  
22 intellectual or medically compromising conditions for which  
23 dental treatment under local anesthesia, with or without  
24 additional adjunctive techniques and modalities, cannot be  
25 expected to provide a successful result and for which dental

1 treatment under general anesthesia can be expected to produce  
2 superior results;

3 (2) insureds for whom local anesthesia is  
4 ineffective because of acute infection, anatomic variation or  
5 allergy;

6 (3) insured children or adolescents who are  
7 extremely uncooperative, fearful, anxious or uncommunicative  
8 with dental needs of such magnitude that treatment should not  
9 be postponed or deferred and for whom lack of treatment can  
10 be expected to result in dental or oral pain or infection,  
11 loss of teeth or other increased oral or dental morbidity;

12 (4) insureds with extensive oral-facial or  
13 dental trauma for which treatment under local anesthesia  
14 would be ineffective or compromised; or

15 (5) other procedures for which  
16 hospitalization or general anesthesia in a hospital or  
17 ambulatory surgical center is medically necessary.

18 B. The provisions of this section do not apply to  
19 short-term travel, accident-only or limited or specified  
20 disease policies.

21 C. Coverage for dental surgery may be subject to  
22 copayments, deductibles and coinsurance subject to network  
23 and prior authorization requirements consistent with those  
24 imposed on other benefits under the same policy, plan or  
25 certificate."

1           Section 4. A new section of Chapter 59A, Article 46  
2 NMSA 1978 is enacted to read:

3           "GENERAL ANESTHESIA AND HOSPITALIZATION FOR DENTAL  
4 SURGERY.--

5           A. An individual or group health maintenance  
6 organization contract delivered, issued for delivery or  
7 renewed in this state shall provide coverage for  
8 hospitalization and general anesthesia provided in a hospital  
9 or ambulatory surgical center for dental surgery for the  
10 following:

11                   (1) insureds exhibiting physical,  
12 intellectual or medically compromising conditions for which  
13 dental treatment under local anesthesia, with or without  
14 additional adjunctive techniques and modalities, cannot be  
15 expected to provide a successful result and for which dental  
16 treatment under general anesthesia can be expected to produce  
17 superior results;

18                   (2) insureds for whom local anesthesia is  
19 ineffective because of acute infection, anatomic variation or  
20 allergy;

21                   (3) insured children or adolescents who are  
22 extremely uncooperative, fearful, anxious or uncommunicative  
23 with dental needs of such magnitude that treatment should not  
24 be postponed or deferred and for whom lack of treatment can  
25 be expected to result in dental or oral pain or infection,

1 loss of teeth or other increased oral or dental morbidity;

2 (4) insureds with extensive oral-facial or  
3 dental trauma for which treatment under local anesthesia  
4 would be ineffective or compromised; or

5 (5) other procedures for which  
6 hospitalization or general anesthesia in a hospital or  
7 ambulatory surgical center is medically necessary.

8 B. The provisions of this section do not apply to  
9 short-term travel, accident-only or limited or specified  
10 disease policies.

11 C. Coverage for dental surgery may be subject to  
12 copayments, deductibles and coinsurance subject to network  
13 and prior authorization requirements consistent with those  
14 imposed on other benefits under the same policy, plan or  
15 certificate."

16 Section 5. A new section of Chapter 59A, Article 47  
17 NMSA 1978 is enacted to read:

18 "GENERAL ANESTHESIA AND HOSPITALIZATION FOR DENTAL  
19 SURGERY.--

20 A. An individual or group health insurance policy,  
21 health care plan or certificate of health insurance delivered  
22 or issued for delivery in this state shall provide coverage  
23 for hospitalization and general anesthesia provided in a  
24 hospital or ambulatory surgical center for dental surgery for  
25 the following:

1                   (1) insureds exhibiting physical,  
2 intellectual or medically compromising conditions for which  
3 dental treatment under local anesthesia, with or without  
4 additional adjunctive techniques and modalities, cannot be  
5 expected to provide a successful result and for which dental  
6 treatment under general anesthesia can be expected to produce  
7 superior results;

8                   (2) insureds for whom local anesthesia is  
9 ineffective because of acute infection, anatomic variation or  
10 allergy;

11                   (3) insured children or adolescents who are  
12 extremely uncooperative, fearful, anxious or uncommunicative  
13 with dental needs of such magnitude that treatment should not  
14 be postponed or deferred and for whom lack of treatment can  
15 be expected to result in dental or oral pain or infection,  
16 loss of teeth or other increased oral or dental morbidity;

17                   (4) insureds with extensive oral-facial or  
18 dental trauma for which treatment under local anesthesia  
19 would be ineffective or compromised; or

20                   (5) other procedures for which  
21 hospitalization or general anesthesia in a hospital or  
22 ambulatory surgical center is medically necessary.

23                   B. The provisions of this section do not apply to  
24 short-term travel, accident-only or limited or specified  
25 disease policies.



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C. Coverage for dental surgery may be subject to copayments, deductibles and coinsurance subject to network and prior authorization requirements consistent with those imposed on other benefits under the same policy, plan or certificate."

Section 6. EFFECTIVE DATE.--The effective date of the provisions of this act is July 1, 2007. \_\_\_\_\_