

SENATE BILL 948

J1

3lr3091

By: **Senator Ready**

Introduced and read first time: February 22, 2023

Assigned to: Rules

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Medical Assistance Program – Adult and Pediatric Dental Services –**
3 **Review of Reimbursement Rates**

4 FOR the purpose of requiring the Maryland Department of Health, on or before a certain
5 date and on a certain basis, to review billed charges and reimbursement rates for
6 adult and pediatric dental services; requiring the Department to use the data
7 gathered to revise the rates for adult and pediatric dental services provided under
8 the Maryland Medical Assistance Program, to ensure that the reimbursement rates
9 paid are sufficient to ensure access to care for Program recipients, and to ensure that
10 the rates paid are not less than certain commercial rates or charges; and generally
11 relating to adult and pediatric dental services.

12 BY repealing and reenacting, with amendments,
13 Article – Health – General
14 Section 15–103.5
15 Annotated Code of Maryland
16 (2019 Replacement Volume and 2022 Supplement)

17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
18 That the Laws of Maryland read as follows:

19 **Article – Health – General**

20 15–103.5.

21 (a) For the calendar year prior to the report date under subsection (b) of this
22 section, the Department shall review the rates paid to providers under the federal Medicare
23 fee schedule and compare the rates under the Medicare fee schedule to the fee-for-service
24 rates paid to similar providers for the same services under the Maryland Medical

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Assistance Program and the rates paid to managed care organization providers for the same
2 services under the Maryland Medical Assistance Program.

3 (b) On or before January 1, 2010, and each January 1 thereafter, the Department
4 shall report, in accordance with § 2-1257 of the State Government Article, to the Senate
5 Finance Committee and the House Health and Government Operations Committee on:

6 (1) The review and comparison under subsection (a) of this section;

7 (2) Whether the fee-for-service rates and managed care organization
8 provider rates will exceed the rates paid under the Medicare fee schedule for the period
9 covered by the review required under subsection (a) of this section;

10 (3) An analysis of the fee-for-service reimbursement rates paid in other
11 states and how those rates compare with those in the State;

12 (4) A schedule for bringing the State's fee-for-service reimbursement rates
13 to a level that assures that all health care providers are reimbursed adequately to provide
14 access to care; and

15 (5) An analysis of the estimated costs of implementing the schedule and
16 any proposed changes to the fee-for-service reimbursement rates for the Maryland Medical
17 Assistance Program and the Maryland Children's Health Program.

18 (C) (1) ON OR BEFORE DECEMBER 1, 2023, AND EVERY 3 YEARS
19 THEREAFTER, THE DEPARTMENT SHALL:

20 (I) REVIEW THE BILLED CHARGES AND REIMBURSEMENT
21 RATES PAID BY ALL COMMERCIAL PAYORS TO MEDICAL AND DENTAL PROVIDERS
22 FOR ADULT AND PEDIATRIC DENTAL SERVICES; AND

23 (II) COMPARE THE CHARGE DATA AND RATES PAID BY ALL
24 PAYORS AS DESCRIBED IN ITEM (I) OF THIS PARAGRAPH TO THE RATES PAID FOR
25 THE SAME SERVICES UNDER THE PROGRAM.

26 (2) THE REVIEW CONDUCTED UNDER PARAGRAPH (1) OF THIS
27 SUBSECTION SHALL EXAMINE THE RATES PAID FOR ALL ADULT AND PEDIATRIC
28 SERVICES, INCLUDING RATES UNDER THE PROGRAM'S PROFESSIONAL SERVICES
29 FEE SCHEDULE RELATED TO PROVIDING ANESTHESIA FOR DENTAL PROCEDURES.

30 (D) THE DEPARTMENT SHALL:

31 (1) USE THE DATA GATHERED FROM THE REVIEW REQUIRED UNDER
32 SUBSECTION (C) OF THIS SECTION TO REVISE THE REIMBURSEMENT RATES FOR
33 ADULT AND PEDIATRIC DENTAL SERVICES PAID UNDER THE PROGRAM;

1 **(2) ENSURE THAT THE REIMBURSEMENT RATES PAID UNDER THE**
2 **PROGRAM FOR ADULT AND PEDIATRIC DENTAL SERVICES ARE SUFFICIENT TO**
3 **ENSURE ACCESS TO CARE FOR PROGRAM RECIPIENTS; AND**

4 **(3) ENSURE THAT THE RATES PAID UNDER THE PROGRAM FOR ADULT**
5 **AND PEDIATRIC DENTAL SERVICES TO ALL MEDICAL AND DENTAL PROVIDERS ARE**
6 **NOT LESS THAN:**

7 **(I) THE AVERAGE COMMERCIAL RATES FOR ALL PAYORS; OR**

8 **(II) THE BENCHMARK CHARGES FOR CODES FOR WHICH**
9 **AVERAGE PAYMENTS CANNOT BE DETERMINED.**

10 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
11 October 1, 2023.