The Massachusetts Dental Society (MDS) believes that all Massachusetts residents should have access to quality oral health care, and they should be able to choose the dental provider that’s best for them.

BACKGROUND

• Assignment of benefits provisions in dental benefit plans allow patients who choose to seek treatment from an out-of-network dentist to direct their insurance carrier to directly pay the provider.

• Permitting the assignment of benefits enables patients to have fewer immediate out-of-pocket expenses, increased choice in providers, and, therefore, greater access to care.

• Without the ability to assign benefits directly to the provider of their choice, patients are responsible for all costs upfront; they must submit a claim to the carrier after the fact; then wait for an undefined amount of time for a reimbursement check.

• The convenience of not fronting payment is an access to care issue and a valuable protection for patients against undue financial hardship.

• Right now, most dental benefits companies recognize assignment of benefits in the Commonwealth, and it has created no disruption in the insurance marketplace. However, carriers are permitted to—and the largest dental benefits company in Massachusetts does—impose an unnecessary burden on patients by refusing to allow the assignment of benefits as part of their contract provisions.

• By withholding the assignment of benefits, carriers are interfering with a patient’s ability to choose the provider who best meets their needs.

• When a patient has a long-time relationship with a dental provider, but their insurance changes, the ability to assign dental benefits permits them to continue seeing their current dentist if they wish to do so without incurring an undue financial hardship.
• Assignment of benefits policies can also protect separated parents from undue financial burden. Right now, without the ability to assign dental benefits to a provider of their choice, one parent may be responsible for fronting full payment for their child’s dental care at the time of service, while the other parent whose policy is being used to cover the child’s care is the one who eventually receives reimbursement.

**KEY PROVISIONS**

To preserve patient choice, this legislation would:

1) Require all insurance carriers to permit a covered person to direct in writing that reimbursable benefits for covered dental services be paid directly to the treating dentist irrespective of whether the dentist has contracted with the carrier as an in-network provider.

2) Require the paying carrier to pay the dentist the same rate or fee as a dentist who had contracted with the carrier for the same services rendered.

This legislation is a simple solution that would apply to all carriers that operate in the Commonwealth.

The MDS asks your support for *An Act Relative to Increasing Patient Choice Through Assignment of Benefits* to preserve patient choice and facilitate a patient’s ability to get care by ensuring that all carriers permit the assignment of dental benefits.

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