



Addressing the problem of cost shifting in dental care

The Massachusetts Dental Society, with the assistance of Representative Angelo Puppolo has filed two important pieces of legislation aimed at cost shifting from dental insurance companies to the nearly three million Massachusetts residents who are uninsured therefore placing a burden on the patient population that generally are the most vulnerable patients of our commonwealth.

House Docket 806 (Non-Covered Services)

Currently, in Massachusetts, if an insurance company does not cover a procedure, the dentist must accept a fee designated by an insurer, even though they pay NOTHING for the procedure. The difference between the dentist charge and insurance company designated fee that is not paid for is cost shifted to the three million Massachusetts residents who lack dental insurance. Please note that non-covered services legislation has been passed in 44 other states.

House Docket 805 (Eliminating Dentistry from Patient First)

The Patients First Law, which was passed in 2021 will go into effect in 2027 following numerous delays. This law, which we feel inadvertently includes dental care, has also presented numerous problematic issues.

At the October 9, 2024 meeting of the Board of Registration in Dentistry (BORID), concerns of collusion and anti-trust caused by following this new law were expressed. The bill requires dentists to refer patients to in-network providers. Dentists have long been trained to avoid discussion of fees and identifying other practitioners network status, for fear of violating Federal anti-trust and collusion statutes. Now dental staff, under patient's first bill, will be responsible to determine who is in what plan and what fee schedule is being used etc.

Furthermore, for those patients in network the dental office is now mandated under the patient's first to give a final "cost" within 48 hours of a patient request. Currently, the wait times on insurance company phone calls can approach 45 minutes or longer which is costly staff time. The use of insurance company website requires the dental office to enter PPI (personally protected information, such as name, DOB). With increased concern over data breaches, it must be noted that electronic HIPPA makes the dentist responsible for breaches. State law should never put a licensed Massachusetts's dentist in jeopardy of violating HIPPA protocols.

All of this dental staff time spent on "investigating dental insurance" is costly and not reimbursed by anyone. Thus, the cost is again shifted to the uninsured in the Commonwealth.