

HB 1846-S.E - DIGEST

(DIGEST AS ENACTED)

Requires the insurance commissioner: (1) For benefit years beginning January 1, 2015, and only to the extent permitted by federal law and guidance, to establish by rule the review and approval requirements and procedures for pediatric oral services when offered in stand-alone dental plans in the nongrandfathered individual and small group markets outside of the Washington health benefit exchange; and

(2) Unless prohibited by federal law and guidance, to allow health carriers to also offer pediatric oral services within the health benefit plan in the nongrandfathered individual and small group markets outside of the Washington health benefit exchange.