

**HB 1852 - DIGEST**

(SEE ALSO PROPOSED 1ST SUB)

Requires health plans that offer pediatric oral services to pay for pediatric oral services classified as diagnostic, preventive, amalgam restorations, and resin-based composite restorations in the American dental association's code on dental procedures and nomenclature before the health plan's deductible is reached, unless prohibited by federal law and guidance.