ACT 55 (SB 127)

2019 Regular Session

Long

<u>New law</u> provides for a direct primary care agreement with a dental practice. Defines "board", "dentist", "direct primary care agreement", and "direct dental practice".

Stipulates that a direct primary care agreement with a dental practice is not health or dental insurance, that a patient shall not forfeit their insurance, Medicaid, or Medicare benefits by purchasing a direct primary care agreement and that a dentist entering into a direct primary agreement is not required to obtain a certificate of authority or license other than to maintain a current license to practice dentistry in this state.

Provides that a direct primary care agreement must be in writing; be signed by a dentist, or agent of the dentist, and the patient, or his or her legal representative; allow either party to terminate the agreement with 30-days written notice to the other party; describe the scope of the services to be covered by the fee; specify the periodic fee and any additional fees outside of the periodic fee; specify the duration of the agreement and any automatic renewal periods; require that no more than 12 months of the periodic fee be paid in advance; and, provide that upon termination of the agreement by the patient, all unearned fees are to be returned to the patient.

Provides that the following be prominently stated in writing in the agreement: the agreement does not constitute health or dental insurance; that a patient insured with the Patient Protection and Affordable Care Act may already have coverage for pediatric dental benefits; that payments made may not count toward a patient's health insurance deductibles and maximum out-of-pocket expenses; and, that a patient is encouraged to consult with their insurance plan before entering into the agreement and receiving care.

Allows a direct dental practice to accept payment of periodic fees for a direct primary care agreement directly or indirectly from third-parties, including employers.

Prohibits a direct dental practice from declining a new direct primary care patient or discontinuing service because of a patient's health status, race, religion, national origin, the presence of any sensory, mental or physical disability, education, or economic status. Allows a direct dental practice to refuse care if in the dentist's opinion, a patient's health condition is such that the provider is unable to provide the appropriate level or type of services or if the dental practice has reached maximum capacity. Allows a direct dental practice to discontinue care if a patient fails to pay the periodic fee, performs an act of fraud concerning the agreement, repeatedly fails to adhere to the recommended treatment plan, is abusive or presents a danger to the staff or other patients, or the direct dental practice discontinues operations.

Provides for prohibited and authorized practices.

Authorizes the board to promulgate rules and regulations to effectuate <u>new law</u>. <u>New law</u> provides that violations of <u>new law</u> constitute unprofessional conduct under R.S. 37:775 and result in sanctions as authorized in prior law.

Effective August 1, 2019.

(Adds R.S. 37:798)