

**304.17A-149 Coverage for anesthesia and services in connection with dental procedures for certain patients.**

All health benefit plans issued or renewed on or after July 15, 2002, that provide coverage for general anesthesia and hospitalization services to a covered person shall provide coverage for payment of anesthesia and hospital or facility charges for services performed in a hospital or ambulatory surgical facility in connection with dental procedures for children below the age of nine (9) years, persons with serious mental or physical conditions, and persons with significant behavioral problems, where the dentist treating the patient or admitting physician involved certifies that, because of the patient's age or condition or problem, hospitalization or general anesthesia is required in order to safely and effectively perform the procedures. This section does not require coverage for routine dental care, including the diagnosis or treatment of disease or other dental conditions and procedures not covered in this section. The same deductibles, coinsurance, network requirements, medical necessity provisions, and other limitations as apply to physical illness benefits under the health benefit plan shall apply to coverage for anesthesia and hospital or facility charges required to be covered under this section.

**Effective:** July 15, 2002

**History:** Created 2002 Ky. Acts ch. 199, sec. 1, effective July 15, 2002.