

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1997

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SENATE BILL 1557

Short Title: Dental, Vision, Hearing Benefits.

(Public)

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Sponsors: Senators Rand; Ballance, Cochrane, Cooper, Hoyle, Lee, Odom, Perdue, Plyler, Soles, and Winner.

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Referred to: State Government, Local Government, and Personnel.

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June 1, 1998

A BILL TO BE ENTITLED

1 AN ACT TO PROVIDE DENTAL, VISION, AND HEARING BENEFITS FOR  
2 DEPENDENT CHILDREN UNDER THE AGE OF NINETEEN YEARS IN THE  
3 TEACHERS' AND STATE EMPLOYEES' COMPREHENSIVE MAJOR MEDICAL  
4 PLAN.  
5

6 The General Assembly of North Carolina enacts:

7 Section 1. G.S. 135-40.5(e) reads as rewritten:

8 "(e) Routine Diagnostic Examinations. – The Plan will pay one hundred percent  
9 (100%) of allowable charges for routine diagnostic examinations and tests, including Pap  
10 smears, breast, colon, rectal, and prostate exams, X rays, mammograms, blood and blood  
11 pressure checks, urine tests, tuberculosis tests, and general health checkups that are  
12 medically necessary for the maintenance and improvement of individual health but no  
13 more often than once every three years for covered individuals age 7 years to age 40  
14 years, once every two years for covered individuals to age 50 years, and once a year for  
15 covered individuals age 6 years and younger and age 50 years and older, unless a more  
16 frequent occurrence is warranted by a medical condition when such charges are incurred  
17 in a medically supervised facility. The following additional services are covered by the  
18 provisions of this section when provided to dependent children under 19 years of age: (i)  
19 dental oral examinations, teeth cleaning, and scaling twice during a 12-month period, full

1 mouth X rays once every 60 months, supplemental bitewing X rays showing the back of  
2 the teeth once during a 12-month period, and fluoride applications once during a 12-  
3 month period; (ii) scheduled routine eye examinations once every 12 months; and (iii)  
4 auditory diagnostic testing services. Provided, however, that charges for such  
5 examinations and tests are not covered by the Plan when they are incurred to obtain or  
6 continue employment, to secure insurance coverage, to comply with legal proceedings, to  
7 attend schools or camps, to meet travel requirements, to participate in athletic and related  
8 activities, or to comply with governmental licensing requirements. The maximum amount  
9 payable under this subsection for a covered individual is one hundred fifty dollars  
10 (\$150.00) per fiscal year."

11 Section 2. G.S. 135-40.6(8) is amended by adding a new sub-subdivision to  
12 read:

13 "u. Additional Services and Supplies for Dependent Children Under  
14 19 Years of Age: The following services and supplies not  
15 otherwise covered by this Part are covered by the Plan only for  
16 dependent children under 19 years of age:

17 1. Dental: Oral examinations, teeth cleaning, and scaling  
18 twice during a 12-month period, full mouth X rays once  
19 every 60 months, supplemental bitewing X rays showing  
20 the back of the teeth once during a 12-month period,  
21 fluoride applications once during a 12-month period, and  
22 routine fillings of amalgam or other tooth-colored filling  
23 material to restore diseased teeth. No benefits are to be  
24 provided for services under this sub-subdivision that are  
25 not performed by or upon the direction of a dentist,  
26 doctor, or other professional provider approved by the  
27 Plan nor for services and materials that do not meet the  
28 standards accepted by the American Dental Association.

29 2. Vision: Scheduled routine eye examinations once every  
30 12 months, eyeglass lenses or contact lenses once every  
31 12 months, routine replacement of eyeglass frames once  
32 every 24 months, and optical supplies and solutions when  
33 needed. Optical services, supplies, and solutions must be  
34 obtained from licensed or certified ophthalmologists,  
35 optometrists, or optical dispensing laboratories. Eyeglass  
36 lenses are limited to single vision, bifocal, trifocal, or  
37 other complex lenses necessary for a Plan enrollee's visual  
38 welfare. Coverage for oversized lenses and frames,  
39 designer frames, photosensitive lenses, tinted contact  
40 lenses, blended lenses, progressive multifocal lenses,  
41 coated lenses, and laminated lenses is limited to the  
42 coverage for single vision, bifocal, trifocal, or other  
43 complex lenses provided by this sub-subdivision.

1                   Eyeglass frames are limited to those made of zylonite,  
2                   metal, or a combination of zylonite and metal. All visual  
3                   aids covered by this sub-subdivision require prior  
4                   approval of the Plan. Upon prior approval by the Plan,  
5                   refractions may be covered more often than once every 12  
6                   months.

7                   3. Hearing: Auditory diagnostic testing services and hearing  
8                   aids and accessories when provided by a licensed or  
9                   certified audiologist, otolaryngologist, or other hearing aid  
10                   specialist approved by the Plan. Prior approval of the Plan  
11                   is required for hearing aids, accessories, earmolds, repairs,  
12                   loaners, and rental aids."

13       Section 3. (a) G.S. 135-40.6(8)f. reads as rewritten:

14               " f.     Dental Services: Oral surgery, including extraction of teeth,  
15                   necessitated because of medical treatment. Dental surgery and  
16                   appliances for mouth, jaw, and tooth restoration necessitated  
17                   because of external violent and accidental means, such as the  
18                   impact of moving body, vehicle collision, or fall occurring while  
19                   an individual is covered under G.S. 135-40.3. No benefits are  
20                   provided in connection with injury incurred in the act of  
21                   chewing, nor for damage or breakage of an appliance such as  
22                   bridge or denture being cleaned or otherwise not in normal  
23                   mouth usage at the time of accident, nor for appliances for  
24                   orthodontic treatment when a class of malocclusion, other than  
25                   orthognathic, or cross bite has been diagnosed. Benefits for  
26                   temporomandibular joint (TMJ) disfunction appliance therapy  
27                   are limited to cases where the TMJ disfunction has been  
28                   diagnosed as solely resulting from accidental means as certified  
29                   by the attending practitioner and approved by the Claims  
30                   Processor.

31                   Benefits shall include extractions, fillings, crowns, bridges, or  
32                   other necessary therapeutic and restorative techniques and  
33                   appliances to reasonably restore condition and function to that  
34                   existing immediately prior to the accident. Injury or breakage of  
35                   existing appliances such as bridges and dentures is limited to  
36                   repair of such appliances unless certified as damaged beyond  
37                   repair.

38                   The provisions of this sub-subdivision shall not apply to the  
39                   benefits provided in G.S. 135-40.6(8)u."

40       (b) G.S. 135-40.6(9)b. reads as rewritten:

41               " b.     Dental care except as covered under ~~subsection (8)f~~ sub-  
42                   subdivisions (8)f. and (8)u. and other dental services covered by

- 1 the surgical benefits section of this Plan, subsection (5)c of this  
2 section;"
- 3 (c) G.S. 135-40.6(9)f. reads as rewritten:  
4 "f. Eyeglasses or other corrective lenses (except for cataract lenses  
5 certified as medically necessary for aphakia persons), hearing  
6 aids, braces for teeth, dental plates or bridges or other dental  
7 prostheses, air-conditioners, vaporizers, humidifiers, mattresses  
8 (other than as supplied with a hospital bed) and specially built  
9 shoes (other than attached to artificial limbs or orthopedic  
10 ~~braces~~); ~~braces~~) not covered by the provisions of G.S. 135-  
11 40.6(8)u.."
- 12 (d) G.S. 135-40.7(11) reads as rewritten:  
13 "(11) Charges for or in connection with any dental work or dental treatment  
14 except to the extent that such work or treatment is specifically provided  
15 for under the Plan. Excluded is payment for surgical benefits for tooth  
16 replacement, such as crowns, bridges or dentures; orthodontic care;  
17 filling of teeth; extraction of teeth (whether or not impacted); root canal  
18 therapy; removal of root tips from teeth; treatment for tooth decay,  
19 inflammation of gingiva, or surgical procedures on diseased gingiva or  
20 other periodontal surgery; repositioning soft tissue, reshaping bone, and  
21 removal of bony projections from the ridges preparatory to fitting of  
22 dentures; removal of cysts incidental to removal of root tips from teeth  
23 and extraction of teeth; or other dental procedures involving teeth and  
24 their bones or tissue supporting ~~structure~~. structure except as provided by  
25 the provisions of G.S. 135-40.6(8)u."
- 26 (e) G.S. 135-40.7(13) reads as rewritten:  
27 "(13) Charges for eyeglasses or other corrective lenses (except for cataract  
28 lenses certified as medically necessary for aphakia persons) and hearing  
29 aids or examinations for the prescription or fitting ~~thereof~~. thereof except  
30 as provided by the provisions of G.S. 135-40.6(8)u."
- 31 (f) G.S. 135-40.6(6)a. reads as rewritten:  
32 "a. No benefits are provided for dental prostheses such as crowns, or  
33 dentures; orthodontic care; operative restoration of teeth  
34 (fillings); dental extractions (whether impacted or not impacted);  
35 apicoectomies; treatment of dental caries, gingivitis, or  
36 periodontal diseases by gingivectomies or other periodontal  
37 surgery; vestibuloplasties, alveoplasties, removal of exostosis  
38 and tori preparatory to fitting of dentures; correction of  
39 malocclusion by orthognathic surgery or other procedures by  
40 repositioning of bone tissue except as permitted pursuant to G.S.  
41 135-40.6(5)c; removal of cysts incidental to apicoectomies or  
42 extraction of teeth. Nothing in this sub-subdivision shall limit  
43 the benefits provided by the provisions of G.S. 135-40.6(8)u."

1           Section 4. This act becomes effective January 1, 1999.