

HOUSE BILL NO. 730

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A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING INSURANCE COVERAGE OF CONDITIONS INVOLVING FACIAL BONES; AMENDING SECTIONS 33-31-111 AND 33-35-306, MCA; AND PROVIDING A DELAYED EFFECTIVE DATE AND AN APPLICABILITY DATE."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

**NEW SECTION. Section 1. Coverage of conditions involving facial bones.** (1) Each individual or

group disability policy, certificate of insurance, or membership contract that is delivered, issued for delivery, renewed, extended, or modified in this state that provides coverage for diagnosis, surgical treatment, or nonsurgical treatment of skeletal disorders must include coverage for any similar diagnostic, surgical, or nonsurgical procedure or treatment involving bones or joints of the jaw and facial regions if the treatment is medically necessary.

(2) Coverage under this section may be subject to deductibles, coinsurance, and copayment provisions to the same extent applied to other diagnostic, surgical, and nonsurgical procedures involving bones or joints of the skeleton. Special deductible, coinsurance, copayment, or other limitations that are not generally applicable to other care covered under the plan may not be imposed on coverage provided under this section.

(3) Nothing in this section may be construed to require a health insurance policy, certificate, or contract to provide dental services if dental services are not otherwise provided as a part of the policy benefit.

(4) This section does not apply to disability income, hospital indemnity, medicare supplement, accident-only, vision, dental-only, or specified disease policies.

**Section 2.** Section 33-31-111, MCA, is amended to read:

**"33-31-111. Statutory construction and relationship to other laws.** (1) Except as otherwise

1 provided in this chapter, the insurance or health service corporation laws do not apply to a health maintenance  
2 organization authorized to transact business under this chapter. This provision does not apply to an insurer or  
3 health service corporation licensed and regulated pursuant to the insurance or health service corporation laws  
4 of this state except with respect to its health maintenance organization activities authorized and regulated  
5 pursuant to this chapter.

6 (2) Solicitation of enrollees by a health maintenance organization granted a certificate of authority  
7 or its representatives is not a violation of any law relating to solicitation or advertising by health professionals.

8 (3) A health maintenance organization authorized under this chapter is not practicing medicine and  
9 is exempt from Title 37, chapter 3, relating to the practice of medicine.

10 (4) This chapter does not exempt a health maintenance organization from the applicable certificate  
11 of need requirements under Title 50, chapter 5, parts 1 and 3.

12 (5) This section does not exempt a health maintenance organization from the prohibition of  
13 pecuniary interest under 33-3-308 or the material transaction disclosure requirements under 33-3-701 through  
14 33-3-704. A health maintenance organization must be considered an insurer for the purposes of 33-3-308 and  
15 33-3-701 through 33-3-704.

16 (6) This section does not exempt a health maintenance organization from:

17 (a) prohibitions against interference with certain communications as provided under Title 33,  
18 chapter 1, part 8;

19 (b) the provisions of Title 33, chapter 22, parts 7 and 19;

20 (c) the requirements of 33-22-134 and 33-22-135;

21 (d) network adequacy and quality assurance requirements provided under chapter 36; or

22 (e) the requirements of Title 33, chapter 18, part 9.

23 (7) Other chapters and provisions of this title apply to health maintenance organizations as follows:

24 Title 33, chapter 1, parts 6, 12, and 13; 33-2-1114; 33-2-1211 and 33-2-1212; Title 33, chapter 2, parts 13, 19,  
25 23, and 24; 33-3-401; 33-3-422; 33-3-431; Title 33, chapter 3, part 6; Title 33, chapter 10; Title 33, chapter 12;  
26 33-15-308; Title 33, chapter 17; Title 33, chapter 19; 33-22-107; 33-22-128; 33-22-129; 33-22-131; 33-22-136  
27 through 33-22-139; 33-22-141 and 33-22-142; 33-22-152 and 33-22-153; [section 1]; 33-22-156 through 33-22-  
28 159; 33-22-180; 33-22-244; 33-22-246 and 33-22-247; 33-22-514 and 33-22-515; 33-22-521; 33-22-523 and

1 33-22-524; 33-22-526; and Title 33, chapter 32."

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3 **Section 3.** Section 33-35-306, MCA, is amended to read:

4 **"33-35-306. Application of insurance code to arrangements.** (1) In addition to this chapter, self-  
5 funded multiple employer welfare arrangements are subject to the following provisions:

6 (a) 33-1-111;

7 (b) Title 33, chapter 1, part 4, but the examination of a self-funded multiple employer welfare  
8 arrangement is limited to those matters to which the arrangement is subject to regulation under this chapter;

9 (c) Title 33, chapter 1, part 7;

10 (d) Title 33, chapter 2, parts 23 and 24;

11 (e) 33-3-308;

12 (f) Title 33, chapter 7;

13 (g) Title 33, chapter 18, except 33-18-242;

14 (h) Title 33, chapter 19;

15 (i) 33-22-107, 33-22-128, 33-22-131, 33-22-134, 33-22-135, 33-22-138, 33-22-139, 33-22-141,  
16 33-22-142, 33-22-152, [section 1], and 33-22-153;

17 (j) 33-22-512, 33-22-515, 33-22-525, and 33-22-526;

18 (k) Title 33, chapter 22, part 7; and

19 (l) 33-22-707.

20 (2) Except as provided in this chapter, other provisions of Title 33 do not apply to a self-funded  
21 multiple employer welfare arrangement that has been issued a certificate of authority that has not been  
22 revoked."

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24 NEW SECTION. **Section 4. Codification instruction.** [Section 1] is intended to be codified as an  
25 integral part of Title 33, chapter 22, part 1, and the provisions of Title 33, chapter 22, part 1, apply to [section 1].

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27 NEW SECTION. **Section 5. Effective date.** [This act] is effective January 1, 2024.

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