

304.17C-090 Payment of claims of dental-only benefits -- Reports -- Interest.

The provisions of KRS 304.17A-700 to 304.17A-730, relating to payment of claims, shall apply to limited health service benefit plans for the provision of dental-only benefits, except as follows:

- (1) A limited health service plan for the provision of dental-only benefits, its agent, or designee shall have three (3) business days in which to respond to an original or corrected claim submitted electronically under KRS 304.17A-704(1)(a) or, within three (3) business days, the limited health service benefit plan for the provision of dental-only benefits, its agent, or designee may list the claim and the date it was received on a file that can be accessed electronically by the provider, its agent, or designee.
- (2) Limited health service benefit plans for the provision of dental-only benefits shall be required to submit the reports required by KRS 304.17A-722 on an annual basis.
- (3) Limited health service benefit plans for the provision of dental-only benefits shall be required to pay interest required under KRS 304.17A-730 for a claim only if the interest calculated on that claim is equal to or greater than five dollars (\$5).

Effective: January 1, 2006

History: Created 2005 Ky. Acts ch. 169, sec. 1, effective January 1, 2006.