

Stronger Together:

*Advocates, administrators,
and providers working to improve
Medicaid adult dental benefits*

September 24, 2024

Presenters



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Presentation Agenda

- Brief overview of the Rubric for Assessing Extensiveness of State Medicaid Adult Dental Benefits and the Medicaid Adult Dental Coverage Checker
- Findings from 2023 survey and first three years of data
- Strategies to improve and expand Medicaid adult dental coverage – the story of two states moving the needle
- Q&A session

What we know about Medicaid adult dental coverage

*Findings from the Medicaid Adult
Dental Coverage Checker*

*Stacey Auger, MPH
CareQuest Institute for Oral Health*

What we know about dental coverage

What we know about Medicaid dental coverage

- Coverage matters and has impact
- Coverage exists - *but* is 'optional' for adults and inconsistent across states
- Medicaid adult dental benefits are often targeted for budget cuts
- Many states are working to protect, improve and expand Medicaid adult dental benefits

Overview of tools

Rubric for Assessing Extensiveness of State
Medicaid Adult Dental Benefits

Medicaid Adult Dental Coverage Checker

Overview of Tools

Rubric for Assessing Extensiveness of State Medicaid Adult Dental Benefits (Rubric)

A [survey tool](#) that defines an extensive Medicaid adult dental benefit and assesses the extensiveness of existing coverage within each state.



Medicaid Adult Dental Coverage Checker

An [interactive tool](#) that displays state-by-state results of the Rubric.

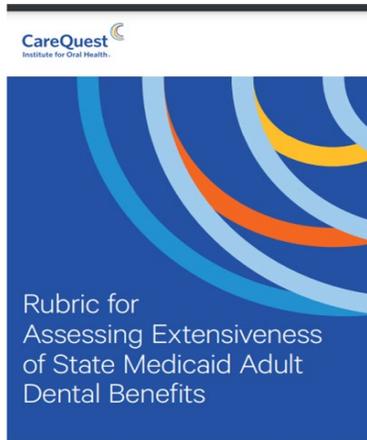
The results represent a snapshot in time and are reflective of coverage offered by each state.

The Coverage Checker currently displays information from the 2020, 2022, and 2023 Rubric.



These tools were developed in partnership with the American Dental Association Health Policy Institute (ADA HPI), Center for Health Care Strategies (CHCS), CareQuest Institute for Oral Health, and an advisory committee of experts in oral health care and state policy.

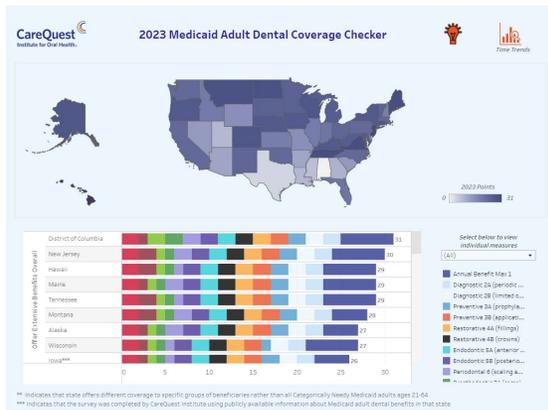
The Intent of the Rubric and Medicaid Adult Dental Coverage Checker



To be resources to and for a wide range of audiences by:

- Providing a clear and consensus-driven definition of an extensive Medicaid adult dental benefit.
- Helping policymakers, administrators, and advocates assess the extensiveness of a state's benefit and identify areas for improvement and expansion.
- Capturing point-in-time information at the state level.
- Assessing the extensiveness of benefits offered in each state.
- Allowing states to assess their benefit offerings in relation to other states.

As data is collected each year, the Coverage Checker will illustrate trends over time of state progress towards extensive Medicaid adult dental benefits.



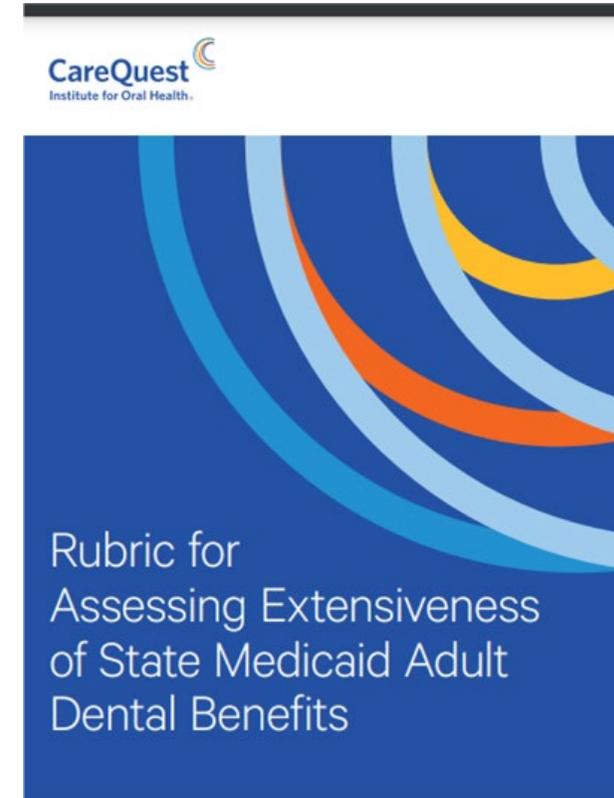
The Rubric

What it is:

- A survey to be completed by state Medicaid dental directors and/or staff.

What it does:

- Defines an extensive Medicaid adult dental benefit.
- Assesses the extensiveness of existing coverage within each state's Medicaid program.



Definition of an Extensive Medicaid Adult Dental Benefit

An extensive dental benefit is one that provides coverage for a range of dental procedures considered adequate for the prevention of disease and promotion of oral health; the restoration of oral structures to health and function; and the treatment of emergency/urgent conditions for the largest group of Categorically Needy Medicaid adult beneficiaries ages 21-64 covered by the state's Medicaid program.

To meet this definition, states must:

- cover specific procedures and codes, including allowed frequency, in eight specific service categories; and
- have an annual benefit maximum greater than or equal to \$1,000.

Service Categories:

Annual benefit maximum
Diagnostic services
Preventive services
Restorative services
Endodontic services
Periodontal services
Prosthodontic services
Extraction services

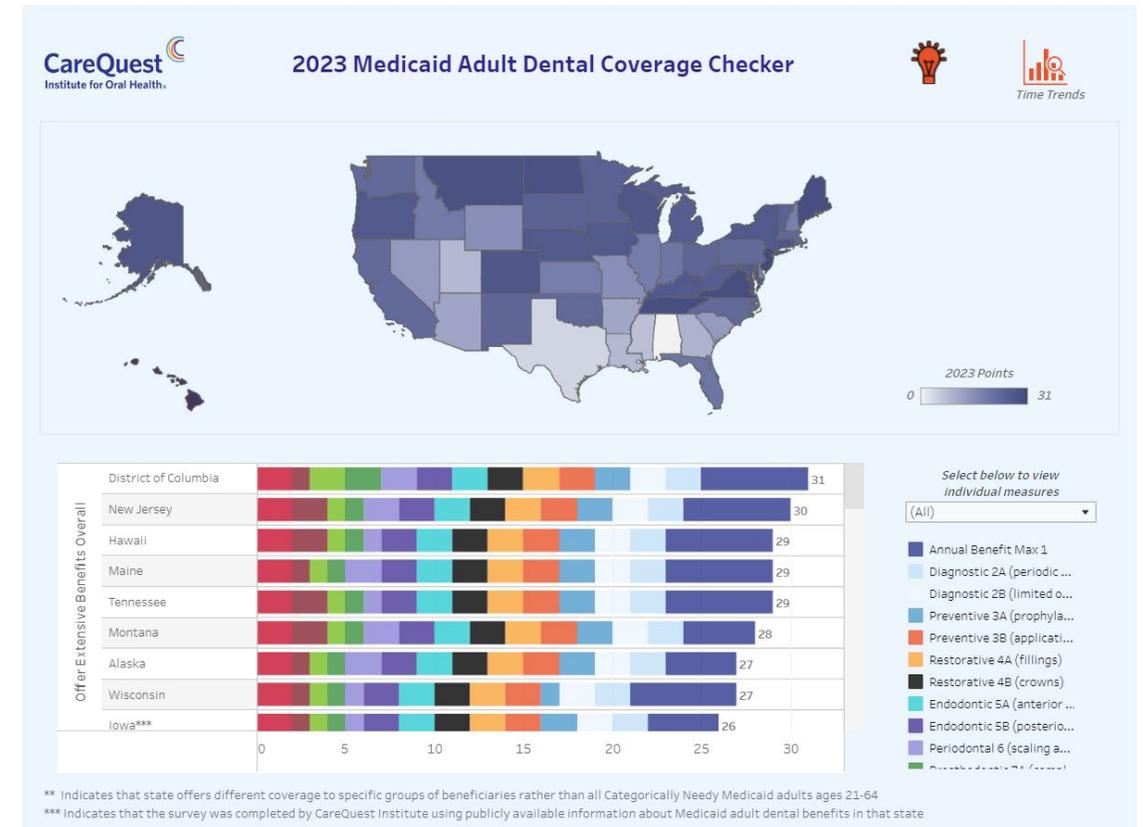
The Medicaid Adult Dental Coverage Checker

What it is:

- An interactive tool that displays state-by-state results of the Rubric

The results represent a snapshot in time and are reflective of coverage offered by each state at the time of completion.

The results display benefits on a continuum from no benefits to extensive.



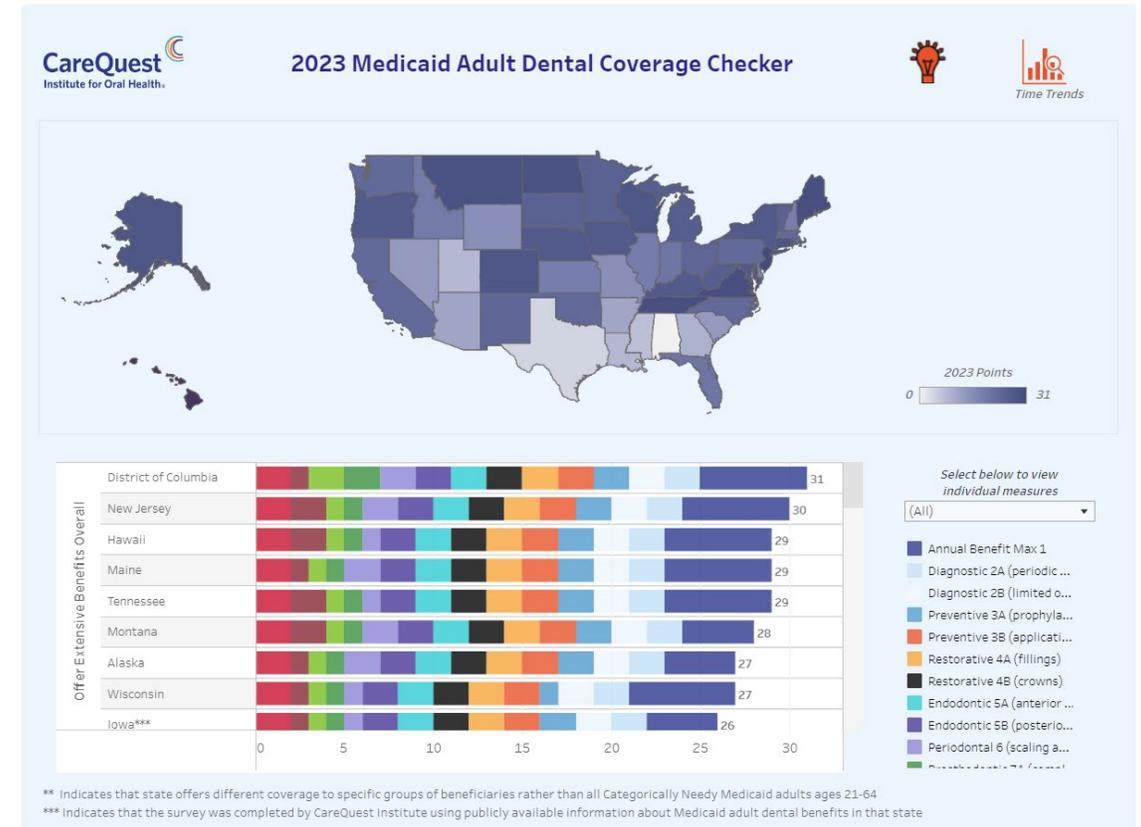
[Visit the 2023 Medicaid Adult Dental Coverage Checker](#)

Be sure to explore the entire page for even more resources!

The Medicaid Adult Dental Coverage Checker

The Coverage Checker contains three sections:

- Map with responses by survey question
- Benefits continuum with points received by measure by state
- Time trends (2020, 2022, 2023)



Results from 2023 and trends from the first three years of data

The Medicaid Adult Dental Coverage Checker

A few highlights from 2023

9

States offer an extensive Medicaid adult dental benefit.

13

States expanded their benefit offerings by one or more services (e.g., cleanings, periodontal services, dentures).

34

States place no dollar limit on dental services that members can receive each year.

Read more!

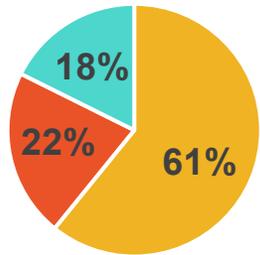
[Medicaid Adult Dental Benefits Are On the Move in 2024](#)

A few highlights from 2023 *(cont'd)*

13 states expanded their benefit offerings by one or more services.

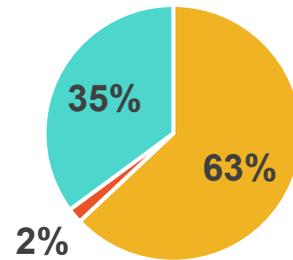
The most commonly added services were cleanings, crowns, posterior root canal therapy, and complete dentures.

**Preventive Services
(Adult Prophylaxis)**



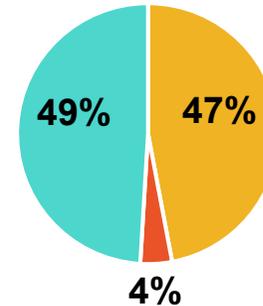
- Covered twice or more per year*
- Covered once per year*
- No coverage*

**Restorative Services
(Crowns)**



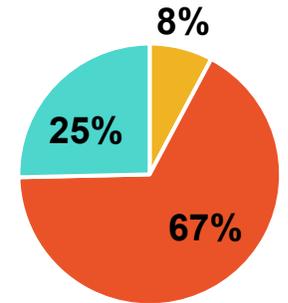
- Covered*
- Covered only in emergencies/for relief of pain or infection*
- No coverage*

**Endodontic Services
(Posterior Root Canal Therapy)**



- Covered*
- Covered only in emergencies/for relief of acute pain*
- No coverage*

**Prosthodontic Services
(Complete dentures)**



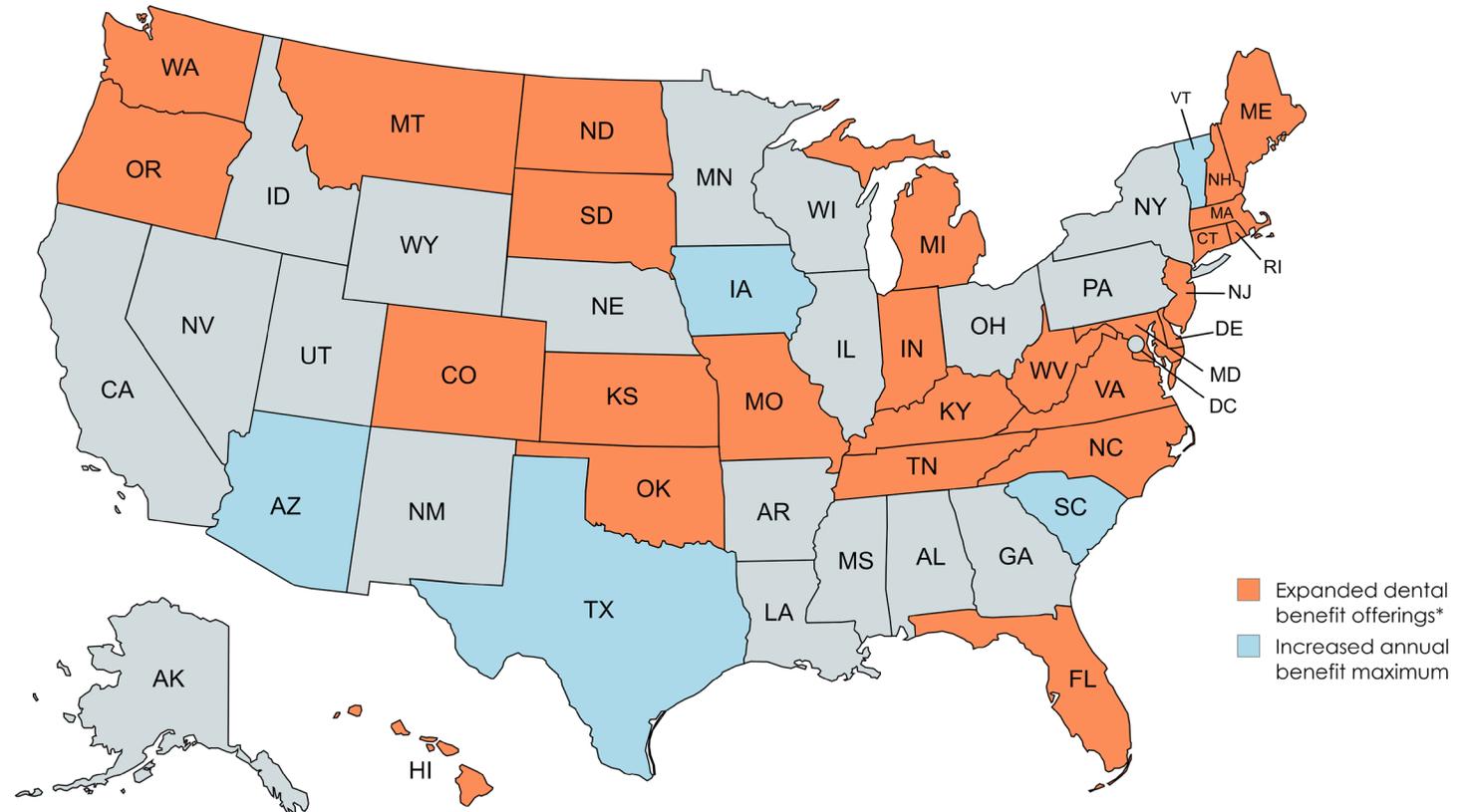
- Covered more than once per five years*
- Covered once per five years or less frequently*
- No coverage*

**For the largest group of Categorically Needy Medicaid adults ages 21-64.*

What we know from three years of data (2020–2023)

States are taking steps to improve and expand their benefits

- 26 states expanded their dental benefit offerings by adding new services or increasing the frequency of coverage.*
 - 10 states added one service
 - 15 states added 2-6 services
 - 8 states added 7 or more services
- 5 states made no changes to benefits offered but increased the annual benefit maximum.

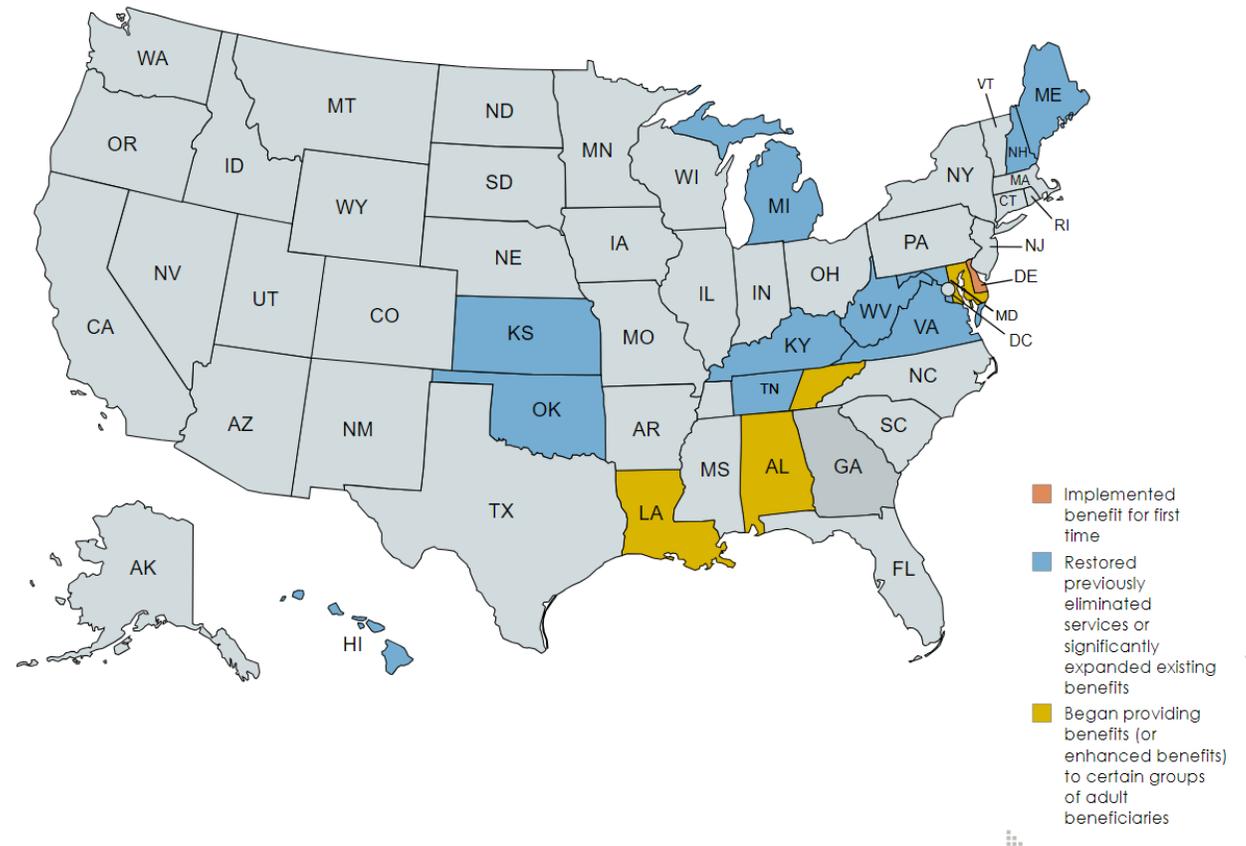


**Several of these states also increased their annual benefit maximum during this time or increased frequency of coverage*

What we know from three years of data (2020–2023)

States are making big and positive changes

- 14 states:
 - implemented benefits for the first time in their state's history.
 - restored previously eliminated services or significantly expanded existing benefits.
 - began providing benefits (or enhanced benefits) to certain groups of adult beneficiaries.*



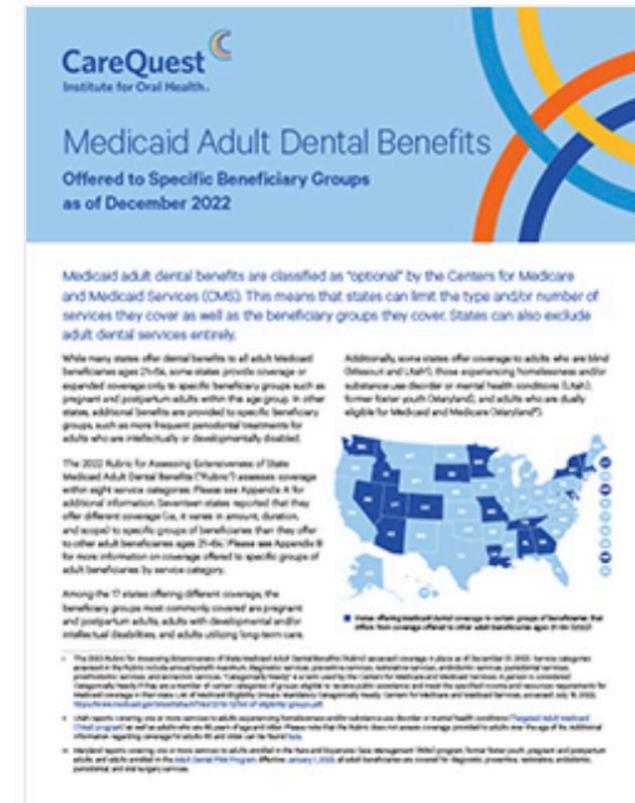
What we know from three years of data (2020–2023)

States are providing additional or enhanced coverage to certain groups of adult beneficiaries

Recognizing the distinct oral health needs of certain groups of adult beneficiaries, some states have opted to provide additional or enhanced services to these groups.

- 20 states reported that they offer different coverage to specific groups of beneficiaries than they offer other adult beneficiaries such as those:
 - who are pregnant and postpartum
 - with intellectual and/or developmental disabilities
 - utilizing long-term care

CHECK OUT: [Medicaid Adult Dental Benefits Offered to Specific Beneficiary Groups as of December 2022](#) *New report for 2023 coming soon!*



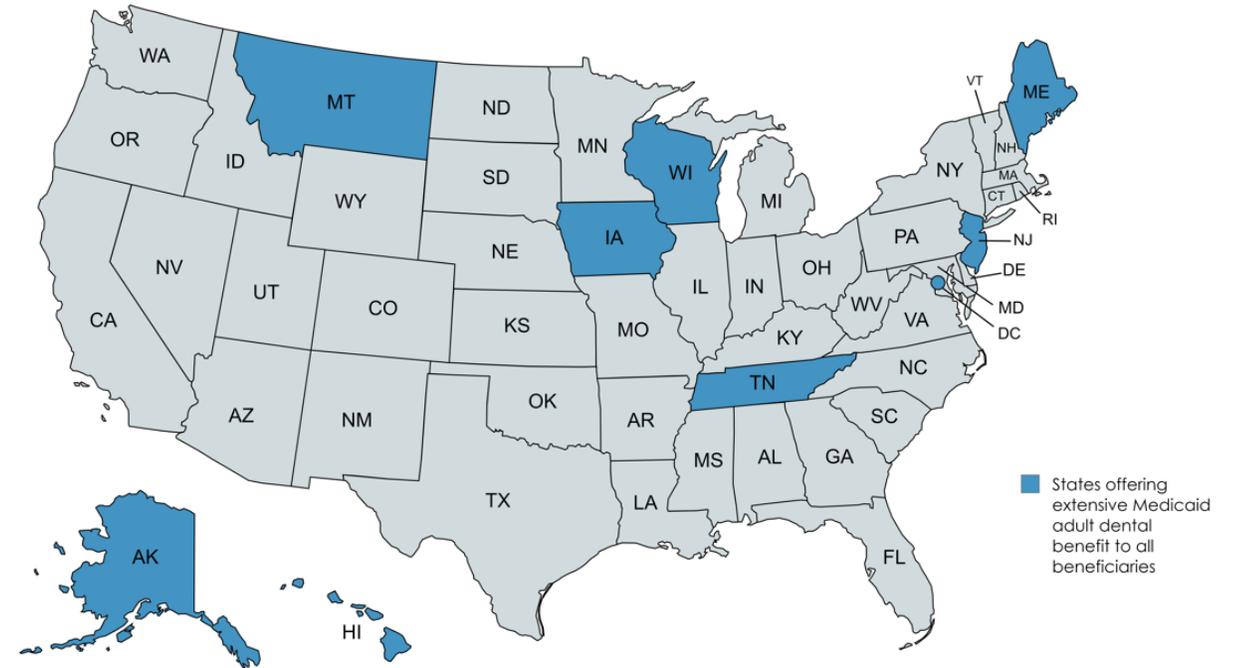
What we know from three years of data (2020–2023)

The number of states offering extensive coverage has grown

- Currently, 9 states offer an extensive benefit to all adult beneficiaries.

This is an increase from:

- 7 states in 2022
- 4 states in 2020



What we know from three years of data (2020–2023)

More change is on the way!

Several states implemented new and expanded benefits for all adults in early 2024.

These new and expanded benefits were not captured in the 2023 dataset because of the 12/31/2023 look-back period.

We have included a brief note of this in the opening paragraph as well as a special section on the landing page detailing the expanded benefits in these states.

Stay tuned! These changes (and likely more) will be captured in the 2024 dataset.

States That Have Improved Medicaid Adult Dental Benefits in 2024

Connecticut Kansas Minnesota Nebraska Utah West Virginia

Connecticut

Effective January 1, 2024, Connecticut Medicaid covers certain periodontal services for qualifying "HUSKY" and "Covered CT" members.

Adults 21 years and older qualify when they have both of the following:

1. Treatable periodontal disease determined by assessment performed by an oral health provider and reviewed during the prior authorization process, and
2. A diagnosis of at least one of the medical conditions listed in the [FAQ](#) evidenced by medical claim history (the member has to have a diagnosis of condition in their medical claim history).

Prior authorization for treatment is required. Historically, Connecticut has not covered periodontal services at all for adults.

[Top](#)

What else we know

Change:

- Takes time
- Takes strong champions that work together
- Can be made through a variety of policy and advocacy pathways
- Can take different forms - broad based or incremental
- Is worth it!

Additional Resources

Medicaid Adult Dental Benefits Are On the Move in 2024

Medicaid Adult Dental Benefits Offered to Specific Beneficiary Groups as of December 2022 ***New 2023 Report Coming Soon!***

Medicaid Adult Dental Benefits: A Progress Report and a Look to the Future

'More People Have Access to Oral Health Services': How West Virginia Is Using the Medicaid Adult Dental Coverage Checker

Dr. Donna Balaski on Strengthening Medicaid Adult Dental Benefits

Medicaid Adult Dental Benefits Are on the Move in 2024

July 16, 2024

By Stacy Auger, MPH, policy consultant, CareQuest Institute

Oral health has been in the national spotlight recently thanks to a May '18 hearing of the Senate Committee on Health, Education, Labor, and Pensions (HELP). The [focus of the hearing was the dental care financing the US and how to make dental care more affordable and accessible to all.](#)

State policymakers and advocates are also recognizing the crisis our country is facing — and they are not waiting for federal action to make change. As we explore below, Medicaid adult dental coverage has continued to gain traction, as the number of states that are expanding adult dental benefits continues to grow! For anyone newer to the topic of Medicaid dental coverage, states are required to provide comprehensive dental benefits for children covered by Medicaid and the Children's Health Insurance Program (CHIP).

For adult Medicaid beneficiaries, however, dental coverage is optional, and states can limit the type or number of services and beneficiary groups they will cover. States can also exclude adult dental services entirely. As a result, there is wide variation in Medicaid adult dental benefits across states — even across beneficiary groups within some states. This landscape changes every year as states add to or reduce their coverage offerings.

At CareQuest Institute, we are pleased to release the [2023 Medicaid Adult Dental Coverage Checker](#), a new interactive tool that allows policymakers, administrators, and advocates to understand where a state's Medicaid adult dental benefits package falls compared to other states, as a valuable one. When she first explored it last summer, she noticed Connecticut offers coverage for extractions, fluoride treatments, and more for adult Medicaid members — but not periodontal.

Why is that coverage crucial? And what headlines have advocates in the state read?

What brought you to the Department of Social Services in Connecticut?

I came to the Department of Social Services in 2004 to help settle a class action lawsuit against the state for the lack of access to dental care. I was charged with designing a program that was less administratively burdensome and improved utilization of dental services.

Medicaid Adult Dental Benefits Offered to Specific Beneficiary Groups as of December 2022

Medicaid adult dental benefits are classified as "optional" by the Centers for Medicare and Medicaid Services (CMS). This means that states can limit the type and/or number of services they cover as well as the beneficiary groups they cover. States can also exclude adult dental services entirely.

Which states offer dental benefits to all adult Medicaid beneficiaries ages 19-64? Those offering "comprehensive" or "expanded" coverage only to specific beneficiary groups such as pregnant and postpartum adults within the same group in other states, additional benefits are provided to specific beneficiary groups such as more frequent preventative treatments for adults who are financially or developmentally disabled?

Additionally, some states offer coverage to adults who are blind (Medicaid and CHIP), those experiencing homelessness and substance use disorder or mental health conditions (CHIP), former foster youth (CHIP/ACA), and adults who are dually eligible for Medicaid and Medicare (CHIP/ACA).

Medicaid Adult Dental Benefits: A Progress Report and a Look to the Future

October 16, 2023

By Stacy Auger, MPH, policy consultant, CareQuest Institute

In July, CareQuest Institute and a group of partners and advisors released the [2023 Medicaid Adult Dental Coverage Checker](#), This updated interactive tool allows policymakers, administrators, and advocates to understand where a state's Medicaid adult dental benefits

Voices from the Field: Dr. Donna Balaski on Strengthening Connecticut Medicaid Adult Dental Benefits

January 20, 2023

Since 2010, Donna Balaski, DMD, has voiced the importance of periodontal coverage for adults on Medicaid in Connecticut.

"By failing to treat periodontal disease," she says, "it is like allowing an infection in a person's lower limb to progress to gangrene where the ultimate treatment is amputation."

Balaski hopes her analogy — and her research-backed words of advocacy — will soon reach the ears of state leaders and lawmakers, inspiring them to strengthen Medicaid adult dental benefits in Connecticut. She knows the far-reaching effects benefits can have on access, equity, and the health of individuals in every corner of the state.

"What you should do in terms of population health and programs that address population health is more important than what code you cover," she says.

Balaski, a manager of medical care administration for the Connecticut Department of Social Services (DSS), knew she wanted to be a dentist when she was 5. In fact, she wrote about it in her "what I want to be when I grow up" essay in fifth grade, when most girls wanted to be a nurse or teacher. She achieved that goal and has been in the DSS for nearly 20 years, including a tenure as the executive director of the Board of Education and Services for the Blind.

She's no stranger to advocacy tools and points to the [Medicaid Adult Dental Coverage Checker](#), an interactive tool that shows where a state's Medicaid adult dental benefits package lies compared to other states, as a valuable one. When she first explored it last summer, she noticed Connecticut offers coverage for extractions, fluoride treatments, and more for adult Medicaid members — but not periodontal.

Why is that coverage crucial? And what headlines have advocates in the state read?

What brought you to the Department of Social Services in Connecticut?

I came to the Department of Social Services in 2004 to help settle a class action lawsuit against the state for the lack of access to dental care. I was charged with designing a program that was less administratively burdensome and improved utilization of dental services.

'More People Have Access to Oral Health Services': How West Virginia Is Using the Medicaid Adult Dental Coverage Checker

January 17, 2023

Jason Roush, DDS, realized early on in his career the importance of improving the oral health of all West Virginians. He started as a private practice dentist after graduating from the West Virginia University School of Dentistry in 1998, but he quickly started to look beyond the four walls of his office.

"I thought [could have a bigger impact working in the state government in the [West Virginia Oral Health Program](#) than what I could in the private sector," Roush says.

Twelve years later, in 2010, he became West Virginia's first full-time state dental director. He's been in that position ever since.

"I'm blessed to work with passionate individuals that want to improve the health and well-being of the citizens of West Virginia," he says.

During that tenure, one of the biggest challenges he has faced is how to strengthen dental benefits for adults on Medicaid. The state only provided coverage for emergency procedures.

That reality was reflected in 2020 when West Virginia appeared on the [Medicaid Adult Dental Coverage Checker](#), an interactive tool that shows where a state's Medicaid adult dental benefits package lies compared to other states. It looks at coverage of specific procedures and services, including allowed frequency, in eight service categories.

"The Coverage Checker allows states to see where their benefits package falls on a continuum from no benefits up to extensive," says Stacy Auger, MPH, a policy consultant at CareQuest Institute. "In doing so, it allows them to identify areas for improvement and expansion."

Moving to the Medicaid Adult Dental Coverage Checker

For many years, policymakers and advocates have relied on the classification system of the American Dental Association (ADA) for state Medicaid adult dental benefits. Adopted and adapted by other organizations, this system classifies Medicaid adult dental benefits into four categories: extensive, limited, emergency, and none. Using the ADA's classification system, a state's dental benefits package may be considered extensive but can include services that are not among those that the best evidence shows are necessary to maintain oral health.

"CareQuest Institute convened a working group that quickly decided the oral health community would benefit from a new assessment tool."

For questions or more
information, please contact:

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Maryland Medicaid Adult Dental

7 years of change making 2016-2023

Health Policy Process

- Agenda Setting
- Formulation
- Decision Making
- Implementation
- Evaluation



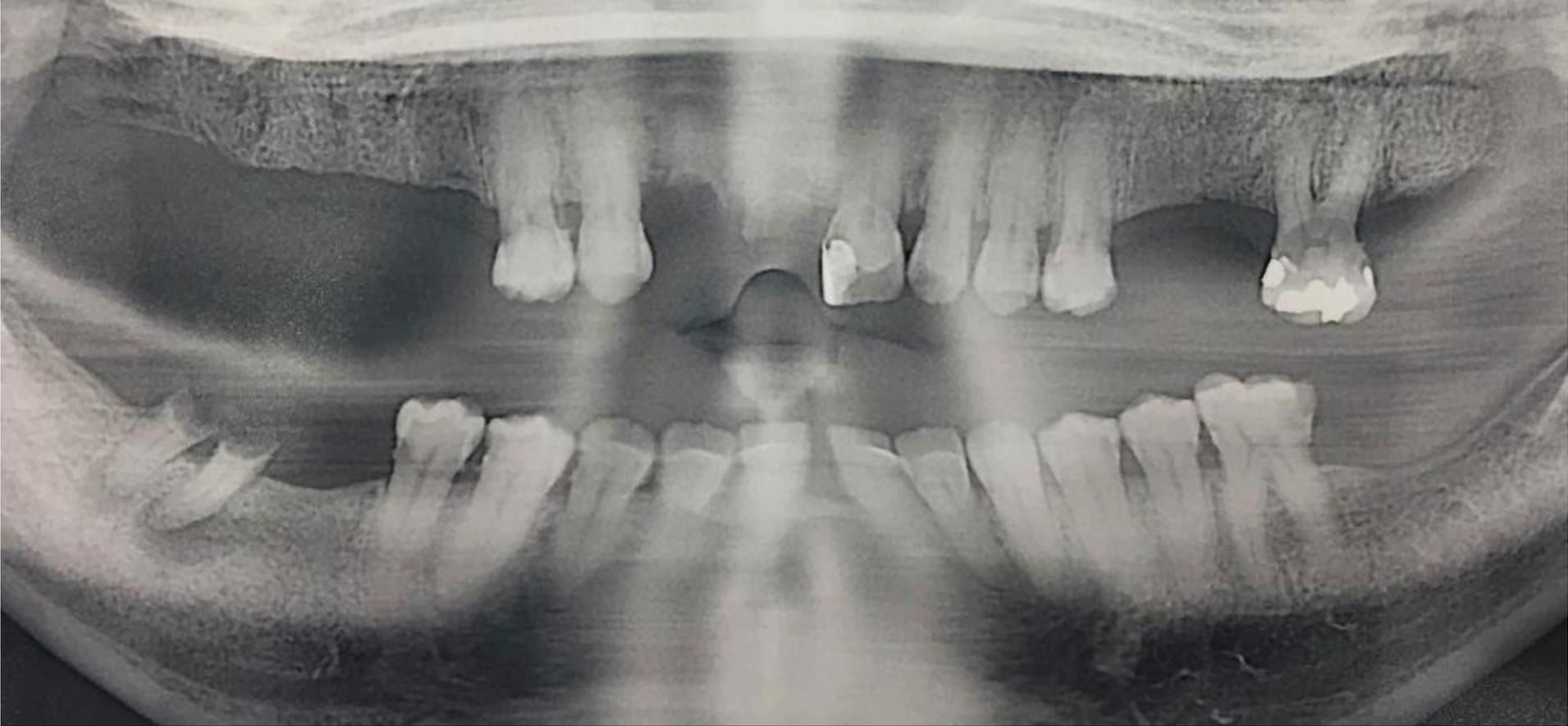
problems recognized as priorities

Agenda Setting



2013

Formulation



alternative policy options are analyzed

Research Brief

The Health Policy Institute (HPI) is a thought leader and trusted source for policy knowledge on critical issues affecting the U.S. dental care system. HPI strives to generate, synthesize, and disseminate innovative research for policy makers, oral health advocates, and dental care providers.

Who We Are

HPI's interdisciplinary team of health economists, statisticians, and analysts has extensive expertise in health systems policy research. HPI staff routinely collaborates with researchers in academia and policy think tanks.

Contact Us

Contact the Health Policy Institute for more information on products and services at hpi@ada.org or call 312.440.2928.

Diverting Emergency Department Dental Visits Could Save Maryland's Medicaid Program \$4 Million per Year

Authors: Kamyar Nasseh, Ph.D.; Marko Vujicic, Ph.D.; Diane Romaine, D.M.D., M.A.G.D.

Key Messages

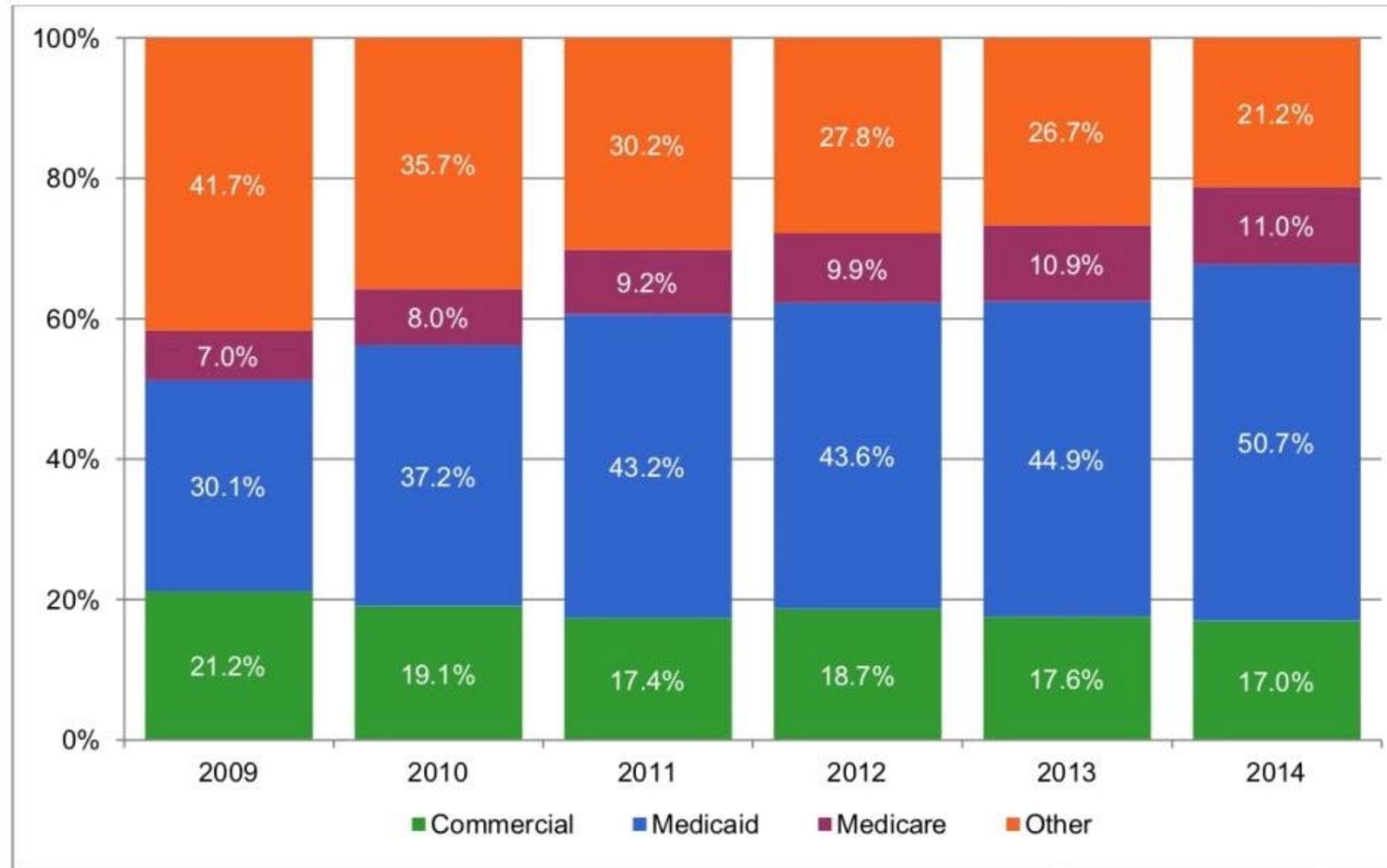
- *Since Fiscal Year 2012, per-capita outpatient dental emergency department visits have decreased in Maryland. The decline can be attributed to reduced visits among children and adults ages 21-40.*
- *The decrease in outpatient dental emergency department visits among children could be attributed to reforms Maryland has instituted in its pediatric Medicaid program since 2007.*
- *As the majority of expenditure for outpatient dental emergency department visits is financed by Medicaid, an effective statewide emergency department diversion program could save Maryland Medicaid up to \$4 million per year.*

Introduction

Emergency department (ED) use for dental care has been a growing problem in the United States, particularly for young adults. From 2000 through 2010, utilization of dental services in EDs has steadily risen for young adults ages 21-34.¹ Other studies also documented an increase in dental ED utilization over the last decade. Dental ED visits are growing as a percentage of all ED visits.^{2,3,4} In 2010, it was estimated that it costs up to \$2.1 billion to treat dental ED visits. Recent work has also shown that a substantial number of ED dental visits can be diverted to outpatient dental offices. Up to 1.65 million dental visits can be diverted to dental clinics, which could potentially save the healthcare system \$1.7 billion.⁵

In this policy note, we analyze trends in dental ED use in the state of Maryland. We analyze dental expenditures in the ED and utilization of dental ED visits by age and payer. We estimate how much the state of Maryland could save by diverting emergency department dental visits to dental offices.

Figure 6: Share of Outpatient Dental Emergency Department Spending by Primary Payer in Maryland Fiscal Years 2009-2014



Source: Maryland Health Services Cost Review Commission Hospital Data.

Emergency Department Visits by Adults for Dental Conditions, 2017



Baltimore County

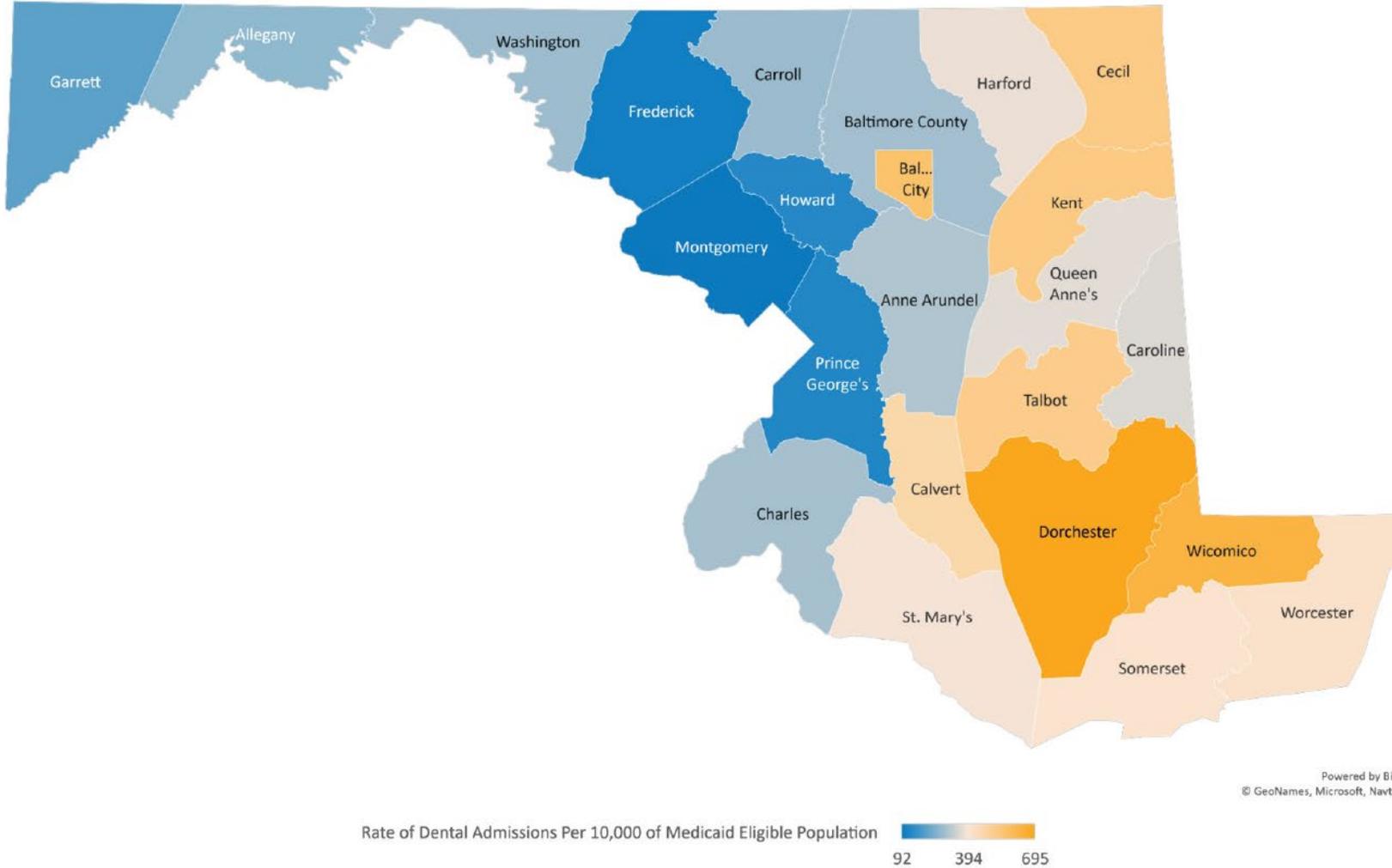


Hospital Visits for Chronic Dental Conditions among Adults in Baltimore County Maryland, Fiscal Years 2013-2016

	Count			
	2013	2014	2015	2016
ED Visits	7,678	7,414	6,587	5,720
Inpatient Admissions	124	115	91	73
Total	7,802	7,529	6,678	5,793
	Rate Per 10,000 of Population			
	2013	2014	2015	2016
ED Visits	123.4	118.6	104.9	90.9
Inpatient Admissions	2.0	1.8	1.4	1.2
Total	125.4	120.4	106.4	92.1
	Total Charge			
	2013	2014	2015	2016
ED Visits	\$3,808,308	\$3,861,629	\$3,957,462	\$3,427,416
Inpatient Admissions	\$978,712	\$818,570	\$809,411	\$698,297
Total	\$4,787,020	\$4,680,199	\$4,766,873	\$4,125,713

Note: --- Indicates 10 or fewer discharges in cell. Charges Adjusted to 2016 dollars.

Exhibit 5: Rate of ED Visits for Chronic Dental Conditions among Medicaid Enrolled Adults in Maryland, FY2016



NADP

2017

	(in millions) [unweighted]	Preventive Dental Care	Preventive Dental Care	without preventive den care
Total Population	15.481 [15,483]	\$474 (\$52)	\$569 (\$38)	
Diagnosis ever provided by physician:				
Coronary heart disease	3.381 [389]	\$904* (\$157)	\$2,714 (\$432)	67% lower
Diabetes	11.187 [1,277]	\$1,554* (\$287)	\$2,422 (\$279)	36% lower
High blood pressure	43.378 [4,344]	\$830* (\$128)	\$1,197 (\$107)	31% lower

Heart attack	2.638 [286]	\$1,639* (\$151)	\$2,544 (\$244)	36% lower
Stroke	2.860 [307]	\$1,401* (\$533)	\$2,940 (\$357)	52% lower
Angina	1.847 [184]	\$1,625* (\$25)	\$2,975 (\$360)	45% lower
Other heart disease	12.136 [1,035]	\$843* (\$218)	\$1,524 (\$192)	45% lower
Cancer	10.396 [822]	\$515* (\$84)	\$1,549 (\$220)	67% lower
High cholesterol	41.502 [3,941]	\$649* (\$96)	\$1,136 (\$106)	43% lower
Asthma	14.274 [1,361]	\$967* (\$150)	\$1,537 (\$218)	37% lower

Decision Making



possible solutions: action vs inaction

MDAC Multi-year Advocacy for Medicaid Adult Dental Long-term and Incremental



2016	Identify bipartisan oral health legislative champions: Delegate Mike McKay and Senator Mac Middleton
2017	Legislation passes instructing MDAC to do a study on impact of dental on emergency department visits and costs. CareQuest Institute and MDAC partner on study (<u>aggregate and county reports</u>).
2018	Findings from the study presented in-person at committee hearings in Annapolis. Legislation passes to establish a Medicaid dental waiver program to cover dental for dually-eligible adults (33,000).
2019	Medicaid Adult Pilot Program launched. MDAC surveys community health centers on implementation needs in anticipation of Medicaid adult dental expansion. Legislation passes to establish capital grants program.
2020	Oral health champions secure funding from the Governor to add dental coverage to Medicaid’s postpartum program (initially, 6 months; expanded to 1 year, 2021).
2021	CareQuest Institute for Oral Health and MDAC partner to <u>update</u> emergency department study. Findings presented to state legislators. Legislation for Medicaid adult dental coverage announced at MDAC Oral Health Summit by cosponsors; bill pre-filed in House and Senate Committees for 2022 session.
2022	Legislation passes Maryland General Assembly, establishing comprehensive dental coverage for all adults in the Medicaid program (750,000); no annual cap (\$\$);
2023	Launch, Maryland Medical Assistance Program – Comprehensive Dental Coverage for Adults

Maryland Medical Assistance Program - Dental Coverage for Adults!



On May 12, 2022, Governor Hogan signs legislation establishing comprehensive Medicaid adult dental coverage (750K+ Maryland adults).

Coverage available to all adults over the age of 21 on January 1, 2023.

- ✓ Preventative
- ✓ Diagnostic
- ✓ Restorative
- ✓ Periodontal

No annual dollar limit (no cap)





putting decisions into effect

Implementation

MDAC's Strategy



1. Consumer engagement

Engage the consumer/patient about the roll out of the new dental benefits package, what services are available, how to check eligibility and how/where to access care.



2. Care coordination engagement

Engage statewide professionals and resource groups/ centers on the new dental benefits, sharing information on how they counsel clients about the services - what services are provided, how to check eligibility and where to access care



3. Implementation evaluation

Lead the initial evaluation of the Medicaid adult dental program implementation in order to review successes, gaps of services, and provide recommendations to the budget committee to ensure maximum impact for Marylanders with Medicaid health insurance.



In 2023, MDAC Launches an Informational Outreach Campaign:

- Developed off insights from the summer 2022 ADWP program social media pilot test.
- Focuses on addressing questions around coverage, eligibility, and provider access.
- Presentations and materials geared towards care coordinators and educators.

MDAC Strategic Outreach to Care Coordinators



1. Howard County Local Health Improvement Coalition
2. Maryland Assembly on School Based Health Care – Webinar
3. Maryland Oral Health Association Meeting (MOHA)
4. Washington County Social Worker Alliance
5. The Coordinating Center Statewide All Co-Worker
6. San Mar Family and Community Services
7. DePaul Dental Program at the Seton Center in Emmitsburg
8. United Community Support of Maryland: PODCAST <https://www.ucsupportsmd.org/>
9. Prince George’s County Healthcare Action Coalition/ Health Equity Workgroup
10. Chesapeake Voyagers, Inc.
11. CCI Health Services Group #1
12. CCI Health Services Group #2
13. Eastern Shore AHEC Oral Health Task Force
14. Montgomery County Aging and Disabilities Services: Community First Choice - Nurse Monitoring
15. Housing Opportunities Commission
16. Prince George’s County FQHC Health Leaders
17. Alliance of Oral Health Across Borders: Public Voices in Global Oral Health: A Call to Action!
18. Community Foundation of Eastern Shore Oral Health Task Force
19. Anne Arundel Health Department Program Manager Meeting (in-person)
20. On Our Own of Howard County, Inc.
21. Worcester County Health Department
22. REACH Health Services
23. Adult Behavioral Health Program Montgomery County

My Reason to Smile Campaign

- This campaign is using Facebook, Instagram, and YouTube to inform Marylanders that all adults with full Medicaid Coverage are now eligible for the Maryland Healthy Smiles Dental Program.
- Leverages organic and paid social media posts to promote key messages about the new benefit, reiterate the vital role oral health plays in maintaining overall health and wellness, and encourage beneficiaries to take the first step to schedule a visit to the dentist.
- Campaign launched in March and will continue throughout 2024.
- To date, **the campaign messages have been viewed over 2.1 M times and over 15,000 on campaign resources**, including 9,500 unique visitors to the landing page.
- Over **179,000 video views from our YouTube Ad campaign with a 21% engagement rate.**



MDAC
Maryland Dental
Action Coalition
Para español, haga clic aquí

A Healthier Mouth is
**MY REASON
TO SMILE**

Take the next step towards a healthier life!
Find a dentist near you.

GET STARTED →



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2023-2024 Medicaid Adult Dental Coverage Update

Year (DOS)	Claims	Adult Members	Unique Providers	Paid YTD
2023	462,745	178,851	1,193	\$128,470,370.45
2024	324,044	147,027	1,132	\$92,385,598.00



**Source – Maryland Department of Health
Stats through 9/17/2024**

Over 250,000 adults have received care at least once (32%)

66,905 new adult members in 2024

137 new unique providers in 2024 only

\$220,855,968.45

Maryland Medical Assistance Program - Dental Services - Coverage and Rate Study (HB103/SB600)



Requiring the *Maryland Department of Health to study the feasibility of including dentures and setting adequate reimbursement rates for providers* on a per-patient basis for house calls and extended care facility calls among the coverage offered by the Maryland Healthy Smiles Dental Program – due by December 1, 2024.

MDAC STAKEHOLDER COMMITTEE

MDAC

FQHCs (executive leadership, dentists, dental hygienist, medical director)

Private MHSDP Providers

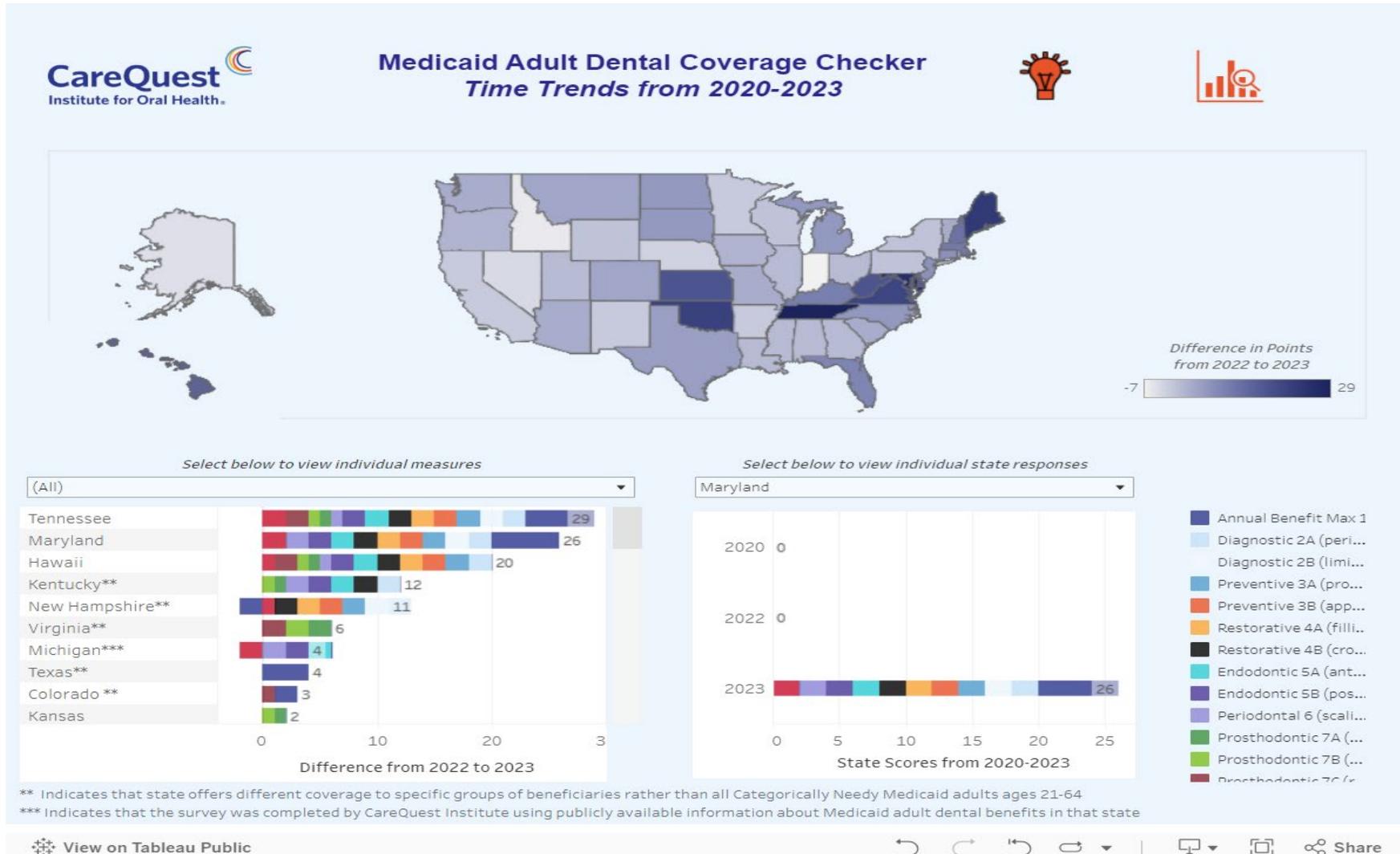
Regional Community Support Organization

Rural Health Representatives

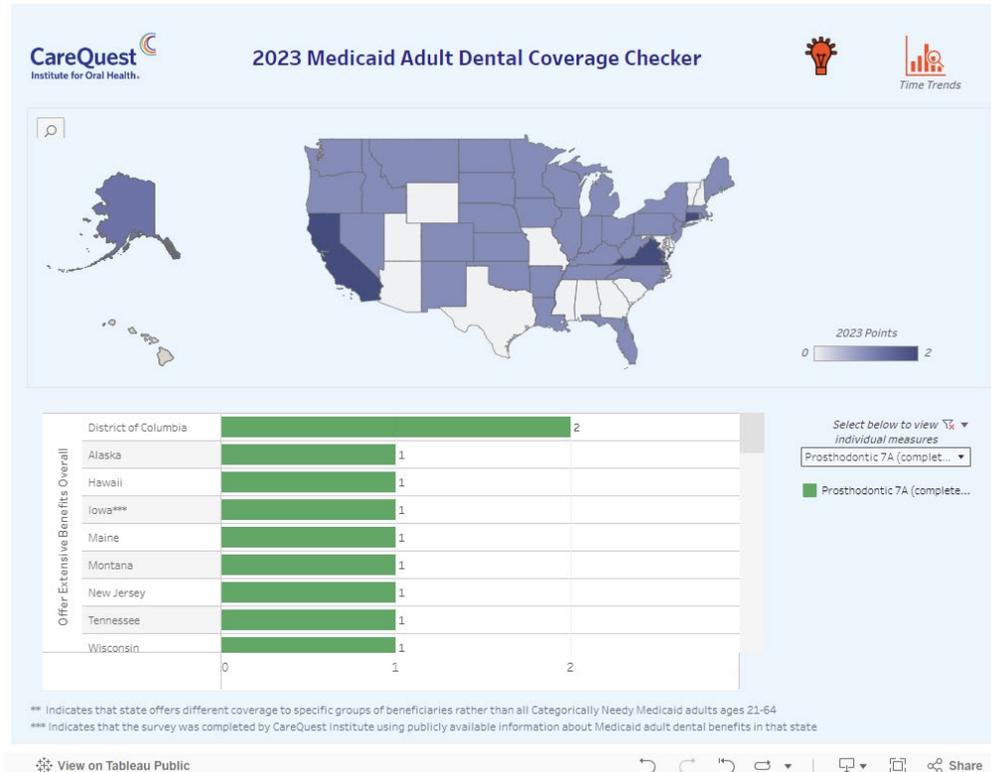
Local Health Department Dental Clinic/Office

Maryland School Based Health Centers

Maryland (2020 to 2023)



Coverage of complete dentures



In the 2023 Rubric survey:

4 states reporting covering complete dentures for all adults more than once per five years (60 months).

34 states reported covering complete dentures for all adults once per five years (60 months) or less frequently.

13 states reported no coverage of complete dentures for all adults.

> Of these states, 8 reported that they provide coverage to specific groups of adult beneficiaries.

Question 7a. Prosthodontic Services: Assess coverage for complete dentures. D5110 AND D5120

Contact Information

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Maryland Dental Action Coalition

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410.312.5456

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Diane D Romaine, DMD, MM, MAGD
Past President Maryland State Dental Association

diromaine@hotmail.com

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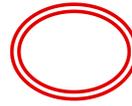
Stronger Together: Improving Kansas Medicaid Adult Dental Benefits

September 24, 2024

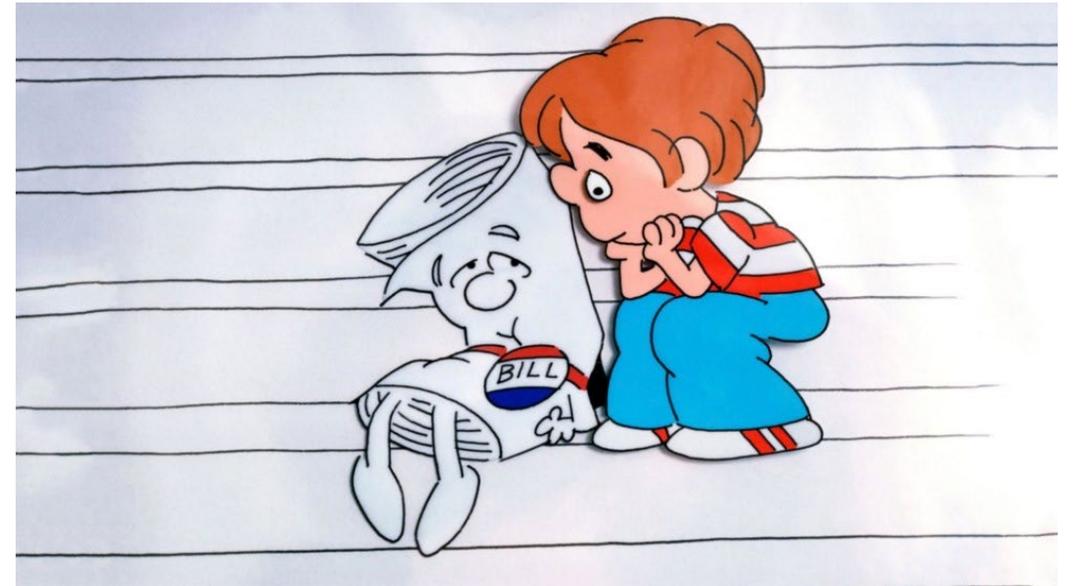
Tanya Dorf Brunner, MS, Executive Director
Oral Health Kansas, Inc.

Kansas Legislative Process

Legislative Processes

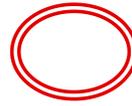


Advocacy through the budget process



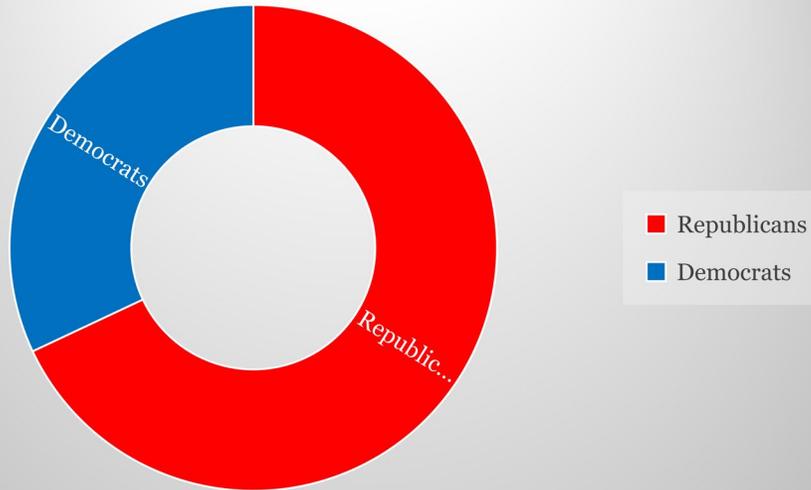
Advocacy through the bill process

Kansas Government



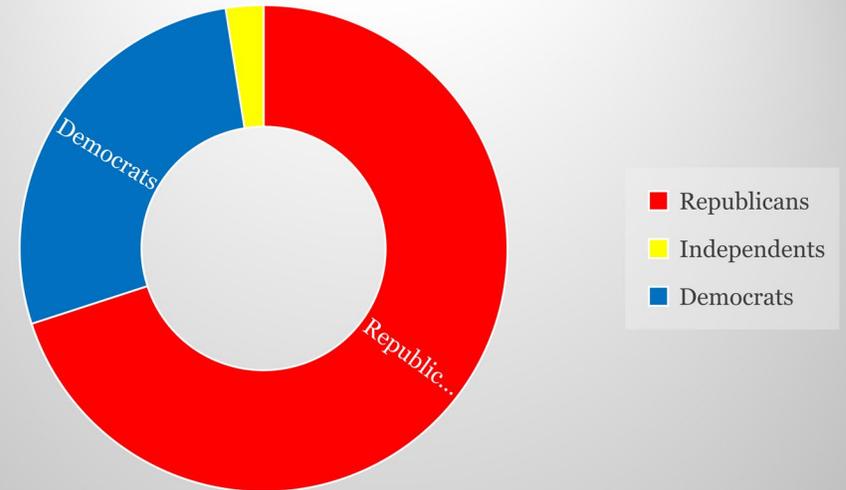
Governor Laura Kelly (Democrat)

Kansas House of Representatives



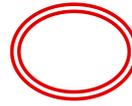
Republicans = 85
Democrats = 40
Super majority = 84

Kansas Senate

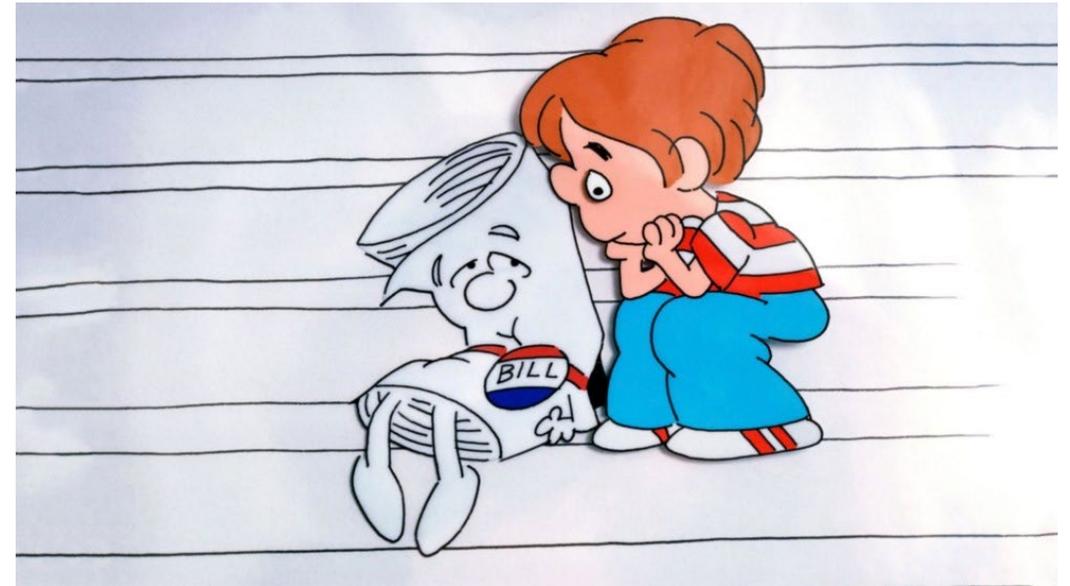


Republicans = 28
Independents = 1
Democrats = 11
Super majority = 27

Medicaid Advocacy in Kansas



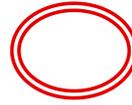
Advocacy through the budget process



Advocacy through the bill process

Improving the Kansas Medicaid Dental Program: An Incremental Approach

History of Adult Dental Care in Kansas



- Oral Health Kansas began advocating for Medicaid dental coverage for adults for nearly 20 years ago
 - Medicaid covered only emergency extractions
- 2007: Comprehensive dental coverage for HCBS Frail Elderly & IDD waiver
 - Coverage was cut in 2010 in the Great Recession
- 2008: Comprehensive dental coverage for pregnant people
 - Dental benefit for pregnant people was cut before it could be implemented
- 2013: Managed Care began
 - Oral Health Kansas advocated for preventive dental coverage for adults in the MCOs' Value-Added Benefits



Journey to Adult Dental Benefit



- 2021: Worked with ADA's Health Policy Institute on a cost benefit study for Kansas
- 2022: Oral Health Kansas formed an advocacy coalition that secured \$3.5 M to extend dental coverage to adults
- Kansas Department of Health and Environment led a stakeholder group to determine what would be covered
 - Fillings, crowns, periodontal care, and SDF

HPI Health Policy Institute
ADA American Dental Association™

Estimating the Cost of Introducing Comprehensive Medicaid Adult Dental Benefits in Kansas

Authors: Marko Vujcic, Ph.D.; Chelsea Fosse, D.M.D., M.P.H.

Key Messages

- Implementing comprehensive adult dental benefits in Medicaid in Kansas would require an estimated year one investment of \$1.4 million in state funds.
- The estimated net cost after reaching "steady state" spending levels three years following implementation is roughly \$960,000 annually in state funds. This estimate comes from \$7.2 million in total additional dental care costs offset by \$4.8 million in medical care and emergency department cost savings, and applying the state's FMAP (i.e., "Medicaid match"). The net cost translates to \$0.51 per enrollee per month in state funds.

In July 2021, the ADA Health Policy Institute (HPI), Families USA, and Community Catalyst released a white paper, "[Making the Case for Dental Coverage for Adults in All State Medicaid Programs](#)." Adult dental coverage is optional in Medicaid programs, yet there is a growing body of evidence that dental benefits improve access to dental care among low-income adults while reducing racial inequities and lowering medical care costs.

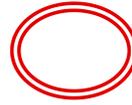
Kansas is one of 16 states that currently provides limited dental benefits for adult enrollees in Medicaid. For Kansas and all other states with limited, emergency-only, or even no adult dental benefits in their Medicaid program, we estimated the increased dental care costs associated with providing extensive coverage, as well as fiscal offsets for medical care cost reductions since improved oral health is associated with lower medical care costs for conditions like diabetes, heart disease, and pregnancy.

The data used for these previous cost estimates in the white paper were based on national data, and did not account for expected savings in emergency department costs due to data constraints.



November 2021

The Power of Language



- Medicaid Expansion is taboo, so using the word expansion in an advocacy context has an outsized effect
- Medicaid already covered dental services for children

We request that the Committee include \$1.4 million SGF (\$3.4 million All Funds) in the KDHE budget to extend dental coverage to adults enrolled in Medicaid.

- The advocacy coalition framed the budget advocacy as “extending” the current coverage



Advocating for Denture Coverage



- 2023: Oral Health Kansas formed an advocacy coalition to push for denture coverage and cited the Coverage Checker

Do other states include denture coverage in Medicaid?

Nineteen states include denture coverage in Medicaid, including our neighbors in Nebraska, Iowa, and Colorado.⁴

What will it cost to include denture coverage in Medicaid?

- The budget estimate to include denture coverage in the Kansas Medicaid program is \$1.7 million. This includes \$687,000 in state funds.

- \$1.2 M appropriated cover dentures and partials

Medicaid Denture Coverage in Kansas

Why is denture coverage important?

Adults in Kansas tell Oral Health Kansas dentures would change their lives.

- A man named Hugo called our office asking for help. He was 65 and on Medicaid, and he told us he had been gluing his dentures together for the past five years. Hugo said they wouldn't stay together any longer, so he wanted help getting new dentures. After talking for a little while, we discovered he also had diabetes and couldn't keep his blood sugar under control because he couldn't eat healthy fruits and vegetables.
- At an event we met Frederick. He was seeking a partial denture because he wanted to be able to smile again. This wasn't just because he missed being able to smile. Frederick had a business idea and wanted to try to pitch it. But he knew he would not be successful if potential investors saw him missing several teeth.



To people who are missing some or all of their teeth, dentures are the key to their health, dignity, and economic prospects.

Why is denture coverage in Kansas?

People with lower income are more likely to be missing teeth or

to be

under the age of 21.³

People in our neighbors in Nebraska, Iowa, and Colorado.⁴

Why is Medicaid?

- The budget estimate to include denture coverage in the Kansas Medicaid program is \$1.7 million. This includes \$687,000 in state funds.
- Typically, less than 20% of people enrolled in Medicaid access dentures, which helps keep the cost of the coverage low for the state.

Who supports including denture coverage in the Kansas Medicaid program?

A [growing list of statewide and local organizations](#) would like to see denture coverage included in the Kansas Medicaid program. This includes disabilities service providers, older adult advocates and providers, behavioral health advocates, early childhood advocates, food banks, homelessness advocates, dental care professional organizations, and health care professional organizations.



ORAL HEALTH KANSAS, INC.
www.oralhealthkansas.org/DentureAdvocacy.html

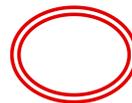
¹ National Institute of Dental and Craniofacial Research: Tooth Loss in Adults (Age 20 to 64). <https://www.nidcr.nih.gov/research/data-statistics/tooth-loss-adults/>

² Centers for Disease Control and Prevention: National Center for Chronic Disease Prevention and Health Promotion. Division of Oral Health. Oral Health Data [online]. 2020. <https://www.cdc.gov/oralhealth/>

³ KANS Presentation to House Social Services Budget Committee, January 24, 2023. https://www.kslegis.gov/legis/laws/2023/20230124_01_testimony.html

⁴ CareQuest Institute for Oral Health: Medicaid Adult Dental Benefit Coverage Checker. <https://www.carequest.org/MedicaidAdultDentalCoverageChecker>

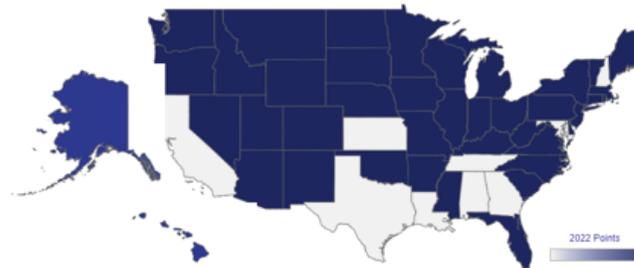
Advocating for Preventive Coverage



- 2024: Oral Health Kansas formed a new advocacy coalition to move preventive coverage from Value Added Benefits to Medicaid and cited the Coverage Checker

Do other states cover basic preventive dental care in Medicaid?

- Over 40 states, including all of our neighboring states, provide basic preventive dental coverage.
- The map below shows states that cover exams for adults.³



- \$4.8 M appropriated cover exams, x-rays, cleanings, and nutritional and tobacco counseling

Basic Preventive Dental Coverage in Kansas

Why is basic preventive dental coverage important?

- Tooth decay and gum disease are nearly 100% preventable yet can cause severe pain, infection, and even be life threatening. Routine preventive care like a checkup, x-rays, and cleaning help prevent these diseases and catch disease early.
- When tooth decay and gum disease are not prevented or discovered and treated early, the cost of dental care becomes much higher.
- The way a person's teeth and mouth look, feel, and function can have a big impact on how others view them, how they perceive themselves, and their ability to work.¹

Why is it important to cover dental exams/x-rays/cleanings in Medicaid?

- Kansas is the only state that uses a combination of Medicaid and value-added benefits (VABs) for adult dental coverage.
- How the VABs are structured varies by managed care organization and changes from year to year, making the system difficult to navigate for dental providers.
- When it is hard to understand how the most essential and basic dental care is covered, providers are reluctant to accept Medicaid patients.

Did included basic preventive dental care for adults in Kansas?

1 population are adults over the age of 21.² restorative dental care in 2023. rate in Kansas is around 4%.

Basic preventive dental care in Medicaid?

of our neighboring states, provide basic preventive dental coverage. ; that cover exams for adults.³



Basic preventive dental care in Medicaid?

ide coverage of exams/x-rays/cleanings for adults in the Kansas Medicaid funds. This includes \$1,936,813 in State General Funds.

Who supports including preventive dental care in the Kansas Medicaid program?

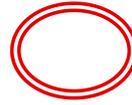
- A growing list of statewide and local organizations would like to see basic preventive dental care included in the Kansas Medicaid program. This includes disabilities service providers, older adult advocates and providers, behavioral health advocates, early childhood advocates, and dental clinics.



<https://oralhealthkansas.org/BasicPreventiveAdvocacy.html>

¹ National Institute for Dental and Craniofacial Research "Oral Health in America: Advances and Challenges," 2021. https://www.nidcr.nih.gov/ohia/advocacy/2021_12/OralHealthinAmericaAdvancesandChallenges.pdf
² KFF Presentation to House Social Services Budget Committee, January 24, 2023. <https://www.kff.org/medicaid/presentation-to-house-social-services-budget-committee-january-24-2023/>
³ CareQuest Institute for Oral Health: Medicaid Adult Dental Benefit Coverage Checker. <https://www.carequest.com/medicaid/adult-dental-coverage-checker/>

How we use the Coverage Checker

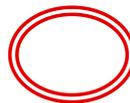


- Provide regular updates to key legislative committees, including KanCare Oversight and House and Senate budget subcommittees
- Help determine next areas for improvement
- Measure our own progress



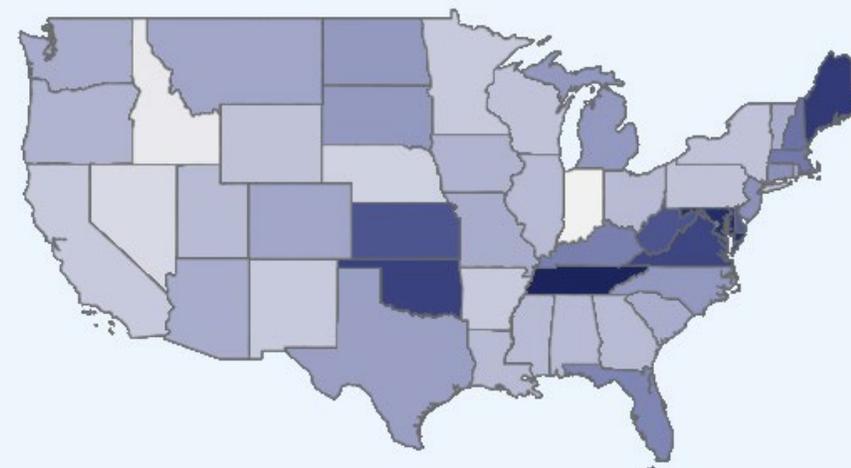
Next Steps

Where do we go next?



- 2025
 - Advocacy coalition will advocate for an increase in the dental rates
 - Focus on growing the Medicaid dental provider network
- Beyond
 - Use Coverage Checker to identify areas for improvement and expansion
 - Continue growing the Medicaid dental provider network

Medicaid Adult Dental Coverage Checker *Time Trends from 2020-2023*



Adult Dental Benefit Resources



<http://oralhealthkansas.org/MedicaidAdultDentalBenefits.html>

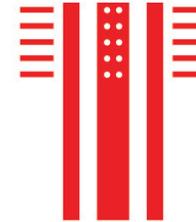


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Tanya Dorf Brunner, Executive Director

tdorf@oralhealthkansas.org

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KanCare Adult Dental Benefit Program

Suzanne Moore, LPN, CPC, LPN Program Consultant

September 24, 2024



Kansas Medicaid Program: KanCare

- Managed care program implemented in 2013
- 98% of KanCare members are enrolled in one of the three Managed Care Organizations
- 2% of KanCare members are Fee for Service
- Each MCO has its own dental subcontractor or manages the dental program in-house

History of Adult Dental Care in Kansas

- 2007: Comprehensive dental coverage for certain HCBS waiver populations until January of 2010
- 2008: Comprehensive dental coverage for pregnant members, but was cut before it could be implemented
- Title XIX adult population had emergency extractions only for coverage
- HCBS Frail Elderly may still qualify for dental benefits based on crisis exception processes put in place after June 30, 2017
- 2013: Preventive dental coverage for adults was certain included in the MCOs' Value-Added Benefits

Coverage of Adult Benefits in KanCare

Legislative session for 2023 - \$3.5 million allocated to expand the coverage of adult dental services

- Coverage included fillings, crowns, periodontal services and silver diamine fluoride treatments

Legislative session for 2024 - \$1.2 million allocated for coverage of dentures and partials for adult Title XIX members

Legislative session for 2025 - \$4.8 million allocated for coverage of adult dental preventative services



How KanCare uses the Coverage Checker

- To view other states' progress on coverage of adult dental benefits
- To seek innovative ways to bring in new benefits, such as the MCOs offering adult dental services in the value-added benefits
- Measure our own progress in KanCare of the adult dental program

Thank you/Questions



Question & Answer

About the presenters

Stacey Auger, MPH joined CareQuest Institute for Oral Health as a Policy Consultant in 2013. In this role, she has focuses largely on the expansion of Medicaid adult dental benefits. As part of this work, Stacey monitors and reports on state legislative activities, co-facilitates the Medicaid Adult Dental Benefit Learning Collaborative, and provides development support and project management of the Rubric for Assessing Extensiveness of State Medicaid Adult Dental Benefits and the Medicaid Adult Dental Coverage Checker. Stacey also collaborates with CareQuest Institute's Analytics and Data Insights team on a variety of publications related to teledentistry, ED use for Non-Traumatic Dental Conditions, and the expansion of Medicaid coverage for benefits for pregnant and postpartum individuals.

Email: staceytaylorauger@gmail.com

Mary Backley is Chief Executive Officer of the Maryland Dental Action Coalition (MDAC). She brings over twenty-five years of nonprofit leadership experience to MDAC, with recognized expertise in strengthening organization infrastructure, financial health, and productivity. Her passion for nonprofit work and improving the lives of others is evident through her extensive experience in senior leadership positions. Her professional experience includes leadership positions at a national philanthropic support organization for over two decades and over ten years at a national organization dedicated to serving veterans and their families where she regularly engaged with representatives from various U.S. Government agencies.

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Tanya Dorf Brunner, MS has served as Executive Director of Oral Health Kansas since 2009. Tanya and the Oral Health Kansas team advocate for Medicaid dental benefits, educate Kansans about the importance of oral health, and promote the benefits of community water fluoridation. She is the co-founder and past chair of the American Network of Oral Health Coalitions, a national organization dedicated to supporting and promoting the work of state oral health coalitions. She also serves as a co-leader of the OPEN Network's Advocacy Committee. Tanya serves on the Board of Directors for DANB (Dental Assisting National Board) and is a former Board member of the Kansas Dental Charitable Foundation. She holds a Bachelor's degree in political science and philosophy from Bethany College and a Master's degree management from Baker University.

Email: TDorf@oralhealthkansas.org

About the presenters *(cont'd)*

Suzanne Moore, LPN, CPC has been a nurse in the long-term care field for 20 years. Since 2018 she has worked as a Nurse Consultant for the State of Kansas. In this role she manages multiple programs including the Dental Program for KanCare, the Kansas Medicaid program. As the Dental Program manager, Suzanne has helped expand adult dental coverage to Kansas Medicaid members with coverage of a wide range of services including preventative and restorative services along with complete and partial dentures.

Email: suzanne.moore@ks.gov

Diane D. Romaine, DMD, MM, MAGD has practiced general dentistry in Frostburg, Maryland, since receiving her DMD from the University of Pittsburgh School of Dental Medicine in 1995 and Masters in Healthcare Leadership from McGill University. In 2010 she organized the first Mission of Mercy free dental clinic in Maryland and became President of the Maryland State Dental Association. Dr. Romaine's commitment to integrating advanced general dentistry access in rural Western Maryland earned her the honor of Maryland Rural Health Practitioner of the Year in 2013. During her tenure as President of the Maryland State Dental Association, (MSDA) she helped pass legislation to increase access to care, by expanding functions of dental hygienists and assistants, and by creating a temporary volunteer dental license. In November of 2014, Dr. Romaine coauthored an American Dental Association (ADA) Health Policy Institute Research Brief, "Diverting Emergency Department Dental Visits Could Save Maryland's Medicaid Program \$4 million per Year". In 2018 she helped pass the Maryland Adult Dental Medicaid Waiver which provided a dental benefit to 38,000 dual Medicaid/Medicare adults across the state and expanding to 800,00 adults in 2023. Dr. Romaine's interests are in oral health policy, and dental access to care.

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