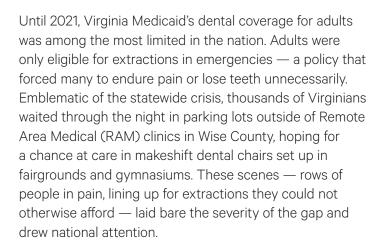


Persistence Meets Opportunity

Virginia's Journey to Comprehensive Medicaid Adult Dental Benefits

CASE STUDY





The commonwealth took a small but important step to address this public health failure in 2015 when it added comprehensive dental benefits for pregnant adults ages 21 and older covered by Medicaid. This coverage, put in place by Gov. Terry McAuliffe's *A Healthy Virginia Plan*, applied through 60 days post-partum. The move led to a significant increase in utilization among a limited highneed population: the percentage of Medicaid-enrolled pregnant women receiving dental services grew from 30.3% in 2015 to 44.3% by 2019. These findings offered proof of concept and laid the foundation for broader expansion of benefits.

Executive Snapshot

Year of Expansion: July 2021

Coverage Checker Classification Before Expansion:

Coverage Checker Classification After Expansion:

Newly Covered Adults: 1.5 million adults

(including ~400,000 new enrollees from 2019 Medicaid Expansion)

Key Legislative Vehicle: FY2021 Virginia State Budget

High-Level Takeaway: Virginia's story is one of persistence and adaptation. Years of advocacy, reinforced by compelling stories and credible fiscal data, converged with political change to bring a long-awaited comprehensive Medicaid dental benefit.

Why This Story Matters: Virginia's journey shows how coalitions can turn entrenched barriers into opportunities when timing, strategy, and persistence align.

What is the Medicaid Adult Dental Coverage Checker?

The Medicaid Adult Dental Coverage Checker is an interactive tool for policymakers, administrators, and advocates to better understand where a given state's Medicaid adult dental benefits package falls on a continuum from no benefits to extensive benefits, helping identify areas for improvement.

Using data from an <u>annual survey</u> of state Medicaid agencies, the Coverage Checker looks at coverage of specific procedures and services, including allowed frequency, in eight service categories. Points are assigned based on coverage provided in each category.



The Turning Point

Ensuing momentum for an extensive dental benefit for all Medicaid-enrolled adults in Virginia built slowly, then all at once. Once the pregnant-adult benefit produced evidence for the dental care utilization and measurable health benefits of coverage, the stage was set. What followed was a fortuitous political shift: in January 2020, Democrats took control of both state legislative chambers. Long-stalled conversations about coverage suddenly had a path forward. Even the financial roadblock began to crumble when the American Dental Association's Health Policy Institute produced credible data showing that a full adult dental benefit was fiscally responsible, dismantling years of inflated estimates that had kept the idea sidelined. As a result, in early March of that year, the Virginia legislature included funding for a comprehensive Medicaid adult dental benefit in the FY2021 budget.

However, just as the benefit was about to launch, the COVID-19 pandemic threatened to derail it. Later in March, faced with crisis budgetary needs, the governor "unallotted" funding for the program. While this felt like a devastating setback, the pandemic also created a unique and unexpected window. As safety-net clinics struggled to stay afloat, dental reimbursement was reframed as essential — a lifeline to stabilize providers and preserve access. By August, following

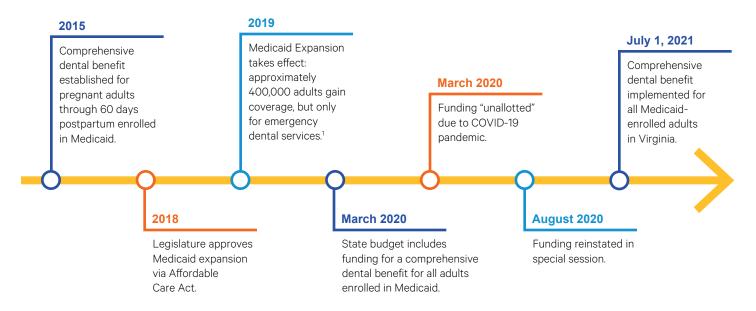
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diligent, targeted efforts by advocates such as Virginia Health Catalyst (Catalyst), lawmakers reinstated the funding during special budget negotiations. In this way, they recognized the benefit as not only an essential health service but also a vital revenue source for safety-net providers during the crisis.

Virginia's distinctive approach to benefits offerings was pivotal here: once benefits are added, they are rarely eliminated. This reality made officials cautious but also committed to following through on the additional, health-essential coverage.

The Journey to Expansion: Policy and Advocacy in Action

The push for comprehensive adult dental benefits spanned more than a decade, fueled by persistence and a collaborative coalition. Key milestones included:



¹ Medicaid expansion in Virginia expanded qualifying income for individuals to 138% of the Federal Poverty Level (FPL); prior to expansion, parents were only eligible for Medicaid if they earned up to 38% of the FPL.

Catalyst, formerly the Virginia Oral Health Coalition, played a central role in the years-long expansion effort, shifting strategies over time to reflect evolving political challenges and opportunities. Under the leadership of then-CEO Sarah Bedard Holland, Catalyst used a two-phased, legislative advocacy approach: starting with grassroots campaigns like postcards, RAM clinic stories, and testimony from families, then pivoting to quieter, relationship-based engagement during the pandemic. Catalyst created themed weekly advocacy pushes and consistently framed oral health as integral to overall health. It also elevated economic arguments such as the expected reduction in costly, preventable emergency department visits, and the healthier, more productive workforce that would result from investments in preventive and restorative care, which resonated across the political spectrum. The organization also invested in long-term relationships with key legislators, particularly Senator George Barker (D-39th District, Virginia State Senate, 2008–2024), who became a pivotal champion.

But Catalyst was never alone. The Virginia Dental Association (VDA) lent credibility with lawmakers by emphasizing provider perspectives and the feasibility of building a network. The Virginia Dental Hygienists' Association (VDHA) highlighted to legislators the importance of prevention, and how expanded benefits could reduce costly downstream care. Free and charitable clinics were also essential allies. The Virginia Association of Free and Charitable Clinics (VAFCC), representing 70 clinics serving more than 110,000 Virginians, advocated directly, leveraged its infrastructure to expand provider capacity, and demonstrated a sustainable "hybrid model" where Medicaid reimbursement supported both insured and uninsured patients.

Within state government, the Department of Medical Assistance Services (DMAS) partnered closely with advocates, as well, with Medicaid Director Cheryl Roberts and dental program consultant Dr. Zachary Hairston offering leadership and technical expertise.

Overcoming Barriers: Turning Skepticism into Support

The path forward was never smooth. Even after funding was secured, doubts lingered. The pandemic strained the state's budget, leaving lawmakers wary of new obligations. Providers worried about whether Medicaid's historically low reimbursement rates would make participation feasible. Some even resisted treating pregnant adults, citing safety concerns. The momentum that had carried Virginia this far could easily have stalled.

Advocates and state leaders knew they had to act quickly to transform hesitation into buy-in. Medicaid Director Cheryl Roberts and DMAS dental consultant Dr. Zachary Hairston became pivotal champions. DMAS also dismantled outdated administrative barriers, such as cumbersome x-ray requirements, that had frustrated dentists for years.

In addition, the general assembly provided a concrete signal that Virginia was serious about supporting dental providers by raising Medicaid reimbursement rates by 30%. As Dr. Hairston explained: "If you're not going to do comprehensive benefits, you're spending in the wind. You're not going to get the traction you need from the patients, from the members, from the dentist."

These decisive steps sent a message: Virginia was not just expanding coverage on paper — it was building a system designed to work. Providers took notice, beneficiaries gained confidence, and the coalition could finally point to tangible progress in making the benefit real.



The idea that you would just have people coming in for essentially emergency type or urgent care wasn't going to cut it anymore. I think people understood that if we're going to really improve healthcare for Virginians, that connection between oral health and the rest of one's health is very important."

Rufus Phillips,
 Chief Executive Officer,
 Virginia Association of Free and Charitable Clinics

Implementation and Early Impact: From Policy to People

On July 1, 2021, the promise of comprehensive dental care for Virginia's Medicaid adults finally became reality. For the first time, coverage included preventive, restorative, surgical, and prosthodontic services — not just extractions.

Implementation relied on partnerships: DMAS worked with the Virginia Dental Association, the Dental Hygienists' Association, and free clinics. Twenty-two free clinics became Medicaid providers, sustaining their mission through a hybrid care model in which a site serves as both a free clinic and a Medicaid provider.

Clear communication was essential: for example, when some members expected to receive a new dental benefits card from Virginia Medicaid to present at their dentists' office and were confused when one never arrived, Catalyst and its partners launched targeted outreach to ensure members knew they could walk into a dentist's office with the card they already had.

To understand the impact of this new benefit, and in collaboration with Virginia Health Catalyst, CareQuest Institute created the interactive <u>Virginia Medicaid Forecasting Tool</u> designed for oral health providers to evaluate the potential impact of existing and new patients covered under the Medicaid adult dental benefit on their practices. The tool enables providers to determine the potential financial impact and additional revenue the benefit could have on their practice to guide decision making about capacity.²

Early indicators of success quickly emerged: utilization of restorative services outpaced extractions, emergency department visits for dental conditions declined, and utilization among pregnant adults increased dramatically from 2,300 in FY2015 to 8,800 in FY2025. Provider participation also grew as reimbursement stabilized their practices. Behind these numbers were lives changed: adults once in chronic pain could now keep their teeth, continue working, and regain dignity and confidence.

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Lessons for Other States: What Virginia's Story Teaches

Virginia's path to an comprehensive adult dental benefit was not linear — it was a story of persistence, pivots, and coalition power. For states looking to follow, several lessons stand out:

- Start small, but start. Incremental wins, like Virginia's benefit for pregnant adults, can prove the concept, build momentum, and create champions.
- Lead with facts. Independent fiscal analyses can dismantle exaggerated cost concerns and reframe the debate around sustainability and value.
- Adapt to the moment. The most effective coalitions adjust their strategies, moving from grassroots mobilization to insider policy engagement as the context shifts.

- Expand the tent. Allies outside traditional oral health circles

 such as free and charitable clinics can become some of
 the most persuasive champions.
- See opportunity in crisis. Even disruptive events, like
 the COVID-19 pandemic, can create new openings when
 advocates frame dental benefits as part of broader recovery
 and resilience.

Virginia's "secret sauce" for achieving an extensive Medicaid adult dental benefit was persistence paired with readiness: a coalition that never gave up, evidence that cut through years of skepticism, and leaders who were prepared to act when the window finally opened.

² While this tool was created using Virginia's Medicaid dental benefit and should be used by providers in the state, it may also be used by providers in other states for case-study comparisons.

Looking Ahead

Virginia's work is far from finished. Sustaining progress will require strengthening the provider network, addressing workforce shortages, and ensuring equitable access across urban and rural communities. But the foundation has been laid: every adult Medicaid member in Virginia now has access to comprehensive dental care. The task ahead is to protect and build upon this achievement, ensuring that coverage translates into lasting oral health. Virginia's experience demonstrates what is possible—and offers a roadmap for other states ready to act.



We were persistent for more than a decade, knowing that if we kept building relationships and showing the data, the opportunity would come. And when it did, we were ready."

> — Sarah Bedard Holland, Former Chief Executive Officer, Virginia Health Catalyst

The Need for Medicaid Adult Dental Coverage Across All States

Access to oral health care remains out of reach for many low-income families, with cost being one of the biggest barriers. Without stable, comprehensive dental benefits, people enrolled in Medicaid — particularly people with disabilities and residents of rural communities — are more vulnerable to preventable health issues. Lack of access to dental care can worsen overall health outcomes and drive higher health care costs, as untreated dental issues can escalate into more serious and costly medical conditions.

The Medicaid Adult Dental Coverage Checker is a tool to help policymakers, administrators, and advocates better understand their state's Medicaid adult dental benefits package.

With that information, they can examine their benefit offering to ensure they are providing coverage that will improve oral health outcomes, increase employment opportunities, and reduce long-term health care spending on chronic disease management and emergency department use.



To explore your state's coverage and for more state use cases, visit the Medicaid Adult Dental Coverage Checker.

