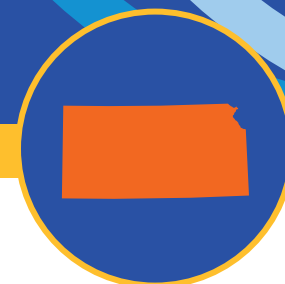


Strategic Persistence in the Heartland

Kansas' Journey to Medicaid Adult Dental Benefits

CASE STUDY



Setting the Stage: Background and Context

Until 2022, Kansas Medicaid's dental coverage for adults was among the most restrictive in the nation. Adults were eligible only for emergency extractions — a policy that forced many to endure preventable pain and tooth loss. The situation was particularly dire for adults with intellectual and developmental disabilities, who faced compounded barriers to dental care, including provider shortages, lack of sedation services, and inadequate care coordination. These challenges made access nearly impossible, even when limited benefits were technically available.

The path to coverage began with incremental steps

during Kansas' transition to Medicaid managed care in 2014. Through advocacy led by [Oral Health Kansas](#) — a non-profit organization dedicated to improving oral health in Kansas through advocacy, public awareness, and education — the state's three Medicaid-contracted managed care organizations (MCOs) agreed to provide preventive dental services (cleanings, exams, and x-rays) as "value-added benefits" at no cost to the state. While this was instrumental in ultimately extending dental benefits for adults through Medicaid, it created confusion for both providers and patients, as each MCO offered slightly different benefits that changed annually.

Executive Snapshot

Date of Extension: July 2022 (phased implementation through July 2024).

Coverage Before New Adult Dental Benefits:



Coverage with Adult Dental Benefits:



Newly Covered Adults: 157,000 Medicaid-enrolled adults

Key Legislative Vehicle: Annual state budget provisos (2022, 2023, and 2024)

High-Level Takeaway: Strategic messaging, diverse coalitions, and incremental progress extended dental coverage in a politically conservative state through relationship-building and data-driven arguments.

Why This Story Matters: Kansas' journey provides a replicable roadmap for conservative states, demonstrating that Medicaid dental benefits can grow by looking beyond typical Medicaid advocacy messaging — highlighting economic arguments, disability advocacy, and bipartisan coalition-building.

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 [annual survey](#) 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: When Innovation Meets Opportunity

The breakthrough moment came from an unexpected conversation in 2019. During routine legislative testimony about the Medicaid dental program, Oral Health Kansas Advocacy Coordinator Christie Wells mentioned that low provider reimbursement rates were a significant barrier to care, as they discouraged providers from enrolling in the Medicaid program. This insight resonated with members of the House Social Services Budget Committee, including its chair, Rep. Will Carpenter (R-75).

Committee members took note that a consumer advocacy organization supported an increase in provider reimbursement rates. Rep. Carpenter championed a \$3 million rate increase in 2019, followed by another \$3 million in 2020 — building momentum that would prove essential for larger policy changes. Carpenter's interest in supporting people with disabilities created a unique opening for broader dental benefit reforms.

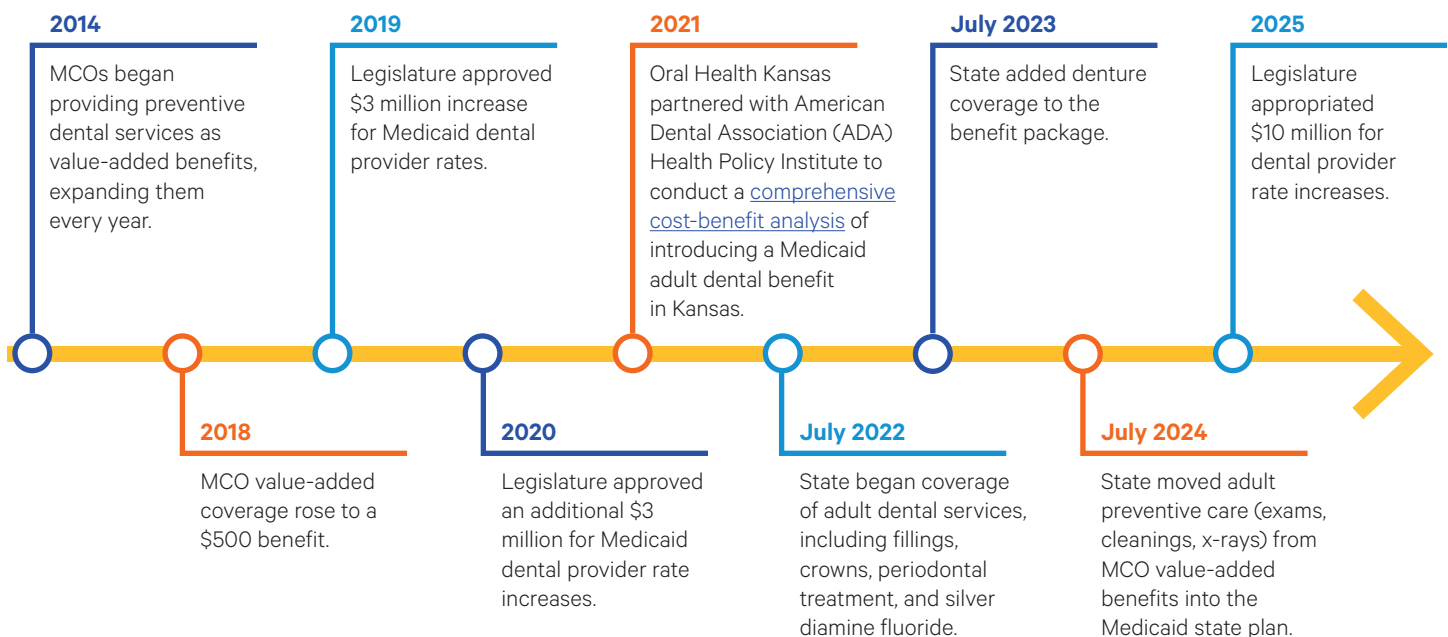
This breakthrough illustrated a principle that Oral Health Kansas had cultivated deliberately: investing in relationships across policymaker transitions. The organization made it standard practice to immediately engage new Medicaid directors and legislative leaders, building trust and understanding before policy proposals were even on the table. When Carpenter took the chair position, Oral Health Kansas had already established credibility through years of consistent, non-partisan engagement.

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The momentum this sparked occurred against the backdrop of Kansas' challenging broader health care landscape. The state had not expanded Medicaid under the Affordable Care Act, meaning the adult Medicaid population largely comprised individuals with disabilities and older adults — populations that Kansas lawmakers had a long history of supporting.

The Journey to Adult Dental Coverage: Policy and Advocacy in Action

The push for Medicaid adult dental benefits built steadily over more than a decade, accelerating significantly after 2019. Key milestones included:



The Power of Data-Driven Advocacy

The transformation from advocacy to systematic policy change in Kansas began in 2021, when Oral Health Kansas partnered with the ADA Health Policy Institute to conduct a [comprehensive cost-benefit analysis](#) of extending dental benefits to Medicaid-enrolled adults. The study provided crucial evidence for advocates: credible data showing that comprehensive adult dental coverage could save the Kansas Medicaid program nearly \$5 million in the first three years through reduced emergency department visits and improved management of chronic conditions such as diabetes and heart disease.

Armed with this analysis, Oral Health Kansas launched its most sophisticated advocacy campaign yet, building annual coalitions that grew larger and more diverse each year. The 2022 campaign, focused on restorative services, brought together dental associations, disability service providers, aging advocates, and even unconventional allies such as food banks and homeless service providers — organizations that recognized the connection between oral health and basic human dignity.

Strategic Coalition Building

Demonstrating exceptional skill in coalition building, Oral Health Kansas created weekly themed advocacy campaigns and consistently framed oral health as integral to overall health and economic productivity. Rather than relying on mass email campaigns, advocates personalized their outreach to legislators, ensuring every conversation felt authentic and relevant.

The coalition's strength lay in its diversity and authenticity. [InterHub](#), representing providers serving Kansans with intellectual and developmental disabilities, brought credibility regarding the real-world challenges that vulnerable populations face. The [Kansas Dental Association](#) offered provider perspectives on feasibility and network adequacy. Free and charitable clinics demonstrated how Medicaid reimbursement could sustain services for both insured and uninsured patients through hybrid care models.

Perhaps most compelling were the perspectives shared by members of Oral Health Kansas' [Lived Experience Advisory Group](#). This group of individuals, who have firsthand experience navigating Medicaid and accessing dental care, brought authentic voices to the advocacy effort. Melanie Jacobs, guardian to a 28-year-old with multiple disabilities, became a powerful advocate after calling 41 dentists in a single day — without success — in search of someone who could provide sedation dentistry or hospital-based care for her daughter. Her story, and others like it, put human faces on policy abstractions.

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— Melanie Jacobs,
Guardian to a 28-year-old with multiple disabilities

"If my child gets an infection or an abscess, it will probably take two or three days for us to figure out that it's her tooth, because she's nonverbal. In that time, the infection can spread through her body, and we can lose her within a week," shared Jacobs. "Framing the need as 'My child could die just because she doesn't have oral health,' shows people that this is not just about teeth."

Navigating Political Realities

Kansas advocates understood their political environment and adapted their messaging accordingly. In a conservative state with a supermajority Republican legislature and a moderate Democratic governor, the most effective advocacy came through direct legislative engagement.

Perhaps no strategic decision better exemplified this political savvy than the deliberate choice to use the word “extension” rather than “expansion” when describing the policy change. In a non-Medicaid expansion state, the term “expansion” carried political baggage that could derail conversations. By consistently referring to “extending” benefits to adults already enrolled in Medicaid — rather than expanding the program itself — advocates framed the change as serving a defined, sympathetic population of adults with disabilities and older adults. This linguistic discipline, maintained across dozens of coalition partners and multiple legislative sessions, helped avoid triggering ideological resistance in a conservative environment.

Advocates also avoided increasingly politicized terms in the current political landscape that could provoke partisan reaction, including language centered on “equity” and “rights.” Instead, they heightened attention on neighborly and civic duty,

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paired with a relentless focus on economic arguments: the cost of preventable emergency department visits, the connection between oral health and workforce productivity, and the potential savings from addressing problems before they became crises. A photograph of a local business’ “Now Hiring Smiling Faces” sign became a powerful visual representation of how oral health connects to employment opportunities.

Overcoming Barriers: From Skepticism to Support

Still, the path toward Medicaid adult dental benefits in Kansas saw several significant obstacles. Even after securing initial funding for restorative services in 2022, implementation challenges emerged quickly. Oral Health Kansas, with support from the CareQuest Institute for Oral Health and the [Health Forward Foundation](#), stepped in to provide critically needed provider and consumer education about the new benefits.

Provider confusion proved particularly challenging. With some services covered by the state plan and others by MCO as value-added benefits, dentists struggled to understand what was available for patients enrolled in different MCOs. As one provider told advocates: “If they have UnitedHealthcare, what’s covered? But if they have Sunflower, what else is covered? I don’t get it.”

This confusion became the foundation for the most complex advocacy campaign yet: moving preventive services from MCO value-added benefits into the Medicaid state plan. The argument was nuanced — asking the state to pay for services that were technically already covered. But advocates persisted. The Senate supported full funding, while the House initially preferred to wait for results from managed care contract renegotiation. Ultimately, the Senate’s position prevailed, and Kansas achieved a nearly comprehensive benefit package in July 2024.

Passage marked a shift in legislative attitudes. What began as skepticism about cost had evolved into genuine pride of ownership. Legislators who had championed the incremental changes now saw themselves as architects of a successful program, actively asking advocates about implementation progress and seeking opportunities to strengthen the benefit further. This investment in the program’s success would prove crucial in securing the \$10 million rate increase in 2025.

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Implementation and Early Impact: From Policy to People

The phased implementation of Kansas' adult dental benefit demonstrated both the promise and the challenges of policy change. Each phase required extensive education efforts. Elements of [the educational campaign](#), led by Oral Health Kansas, ranged from [animated videos](#) explaining the new benefit, to flyers for consumers, to training for MCO care coordinators to ensure they were aware that the state now covered dental services for adults.

Early indicators suggest the policy is working as intended. Kevin Robertson, Executive Director of the Kansas Dental Association, noted declining attendance at dental “Kansas Mission of Mercy” events — large-scale volunteer clinics where dentists provide free care to hundreds of uninsured and underinsured patients over two days — suggesting that more people are now accessing regular dental care through Medicaid. Members of a new [Dental Provider Advisory Group](#) report that the new services for adults and 2025 rate increase are promising. New dental offices have also begun enrolling with Medicaid, citing the rate increase as their motivating factor.

The development of the [My Dental Care Passport](#) — a communications tool that helps people with disabilities share how they communicate, what worked in past dental visits, what parts of an appointment may be difficult, and how some simple accommodations can make a dental visit successful — has

also streamlined care for people with disabilities, reducing the communication barriers that previously prevented access.

For individuals like Melanie Jacobs' daughter Sandra, the policy changes have been transformative. After years of struggling to find a dentist who can provide her care, her family now has an established relationship with a provider who has created a sensory-friendly environment and treats Sandra with the dignity and respect she deserves.

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Lessons for Other States: What Kansas' Story Teaches

Kansas' success in extending dental benefits to Medicaid-enrolled adults offers several key lessons for advocates in other conservative states:

- **Build incrementally, but persistently:** Kansas' rate increases in 2019–2020 created momentum that enabled larger policy changes. Small wins can lay the foundation for bigger victories.
- **Lead with economics, and align solutions with ideology:** Data-driven arguments about cost savings and workforce productivity resonated across party lines, as did the notion that making dental care accessible fulfills a duty to your community and constituents.
- **Create authentic, diverse coalitions:** The most powerful advocates were often unexpected — parents with children with disabilities, food banks, and homeless service providers — whose authentic voices carried more weight than traditional health advocates alone.
- **Invest in relationships, especially during leadership transitions:** Oral Health Kansas' practice of immediately engaging new Medicaid directors and legislative leaders

created valuable partnerships that paid dividends over time. Rather than waiting for policy opportunities to emerge, the organization built relationships during ‘quiet’ periods, ensuring that when advocacy moments arrived, they were working with allies rather than strangers.

- **Adapt messaging to the political environment:** Recognizing that “expansion” language would be problematic, advocates consistently used “extension” terminology and emphasized economic rather than equity arguments.
- **Don't leave anything to chance:** Advocates' willingness to stay until midnight during budget negotiations, meet personally with every committee member, and maintain a physical presence in hearings demonstrated the level of commitment necessary for success.

Kansas' approach required exceptional persistence — advocacy efforts began in 2003 and didn't achieve major success until 2022. But the foundation-laying work proved essential when the political window finally opened.

Current Challenges and Future Priorities

Despite these successes, Kansas continues to face challenges in fully implementing its adult dental benefit. Provider network adequacy remains a significant issue, particularly for people who require sedation dentistry or hospital-based care. Kansas Medicaid conducted [a study of reimbursement rates](#) in comparison to Medicare and four peer states — Colorado, Iowa, Missouri, and Nebraska — which revealed shortcomings in dental care reimbursement compared to several of its neighbors. Advocates continue to push for substantial rate increases modeled after Missouri's approach.

The [October 2024 Special Committee on Sedation Dentistry](#) produced eight policy recommendations — far exceeding advocates' expectations and creating momentum to address access barriers for individuals with complex needs. The committee's enthusiasm reflected a broader shift: legislators who once needed convincing now actively sought solutions to remaining access barriers, viewing the dental benefit as a signature achievement worth perfecting. Implementation of [My Dental Care Passport](#) and development of a dental Medicaid facilitator program, modeled after Missouri's approach, represent ongoing efforts to strengthen the provider network and streamline access.

Looking Ahead

Kansas' work continues with ongoing efforts to strengthen provider networks and address remaining access barriers through their multi-stakeholder [Pathways to Oral Health](#) initiative. The state's experience demonstrates what's possible when strategic persistence meets political opportunity. While the journey required nearly two decades of relationship-building and advocacy, ***the result is nearly comprehensive dental coverage for 157,000 adults who previously had access only to emergency extractions.***



Do the work. Don't leave anything to chance. If there's any chance you can get what you're trying to do done, do it."

— Tanya Dorf Brunner,
Executive Director, Oral Health Kansas

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.](#)**