

Building on Tragedy, Sustained by Strategy

Maryland's Path to Comprehensive Medicaid Adult Dental Coverage

CASE STUDY



Setting the Stage: Background and Context

Prior to 2023, Maryland Medicaid's dental coverage for non-pregnant adults mirrored the restrictive policies found in most states: emergency services only. For vulnerable adults, this often meant enduring preventable pain, infection, and tooth loss — or turning to hospital emergency departments (EDs) for problems that could be treated in a dental office at a fraction of the cost.

Unfortunately, Maryland's path to expanded coverage began with tragedy. In 2007, 12-year-old Deamonte Driver, a boy who had been enrolled in the state's Medicaid program, died from a brain infection that originated from an untreated tooth abscess. His death became a catalyzing moment for dental reform in

Maryland, sparking immediate improvements in children's dental coverage and access.

In response, the Secretary of the Maryland Department of Health and Mental Hygiene (MDH) established the Dental Action Committee (DAC) and charged the committee with making recommendations on increasing access to dental care for underserved children in the state. In 2010, the DAC transitioned into an independent, statewide network, the Maryland Dental Action Coalition (MDAC). MDAC incorporated into a 501(c)3 non-profit organization in 2011, dedicated to improving oral health equity and disparities in accessible care for all Marylanders.

Executive Snapshot

Date of Expansion: January 1, 2023 (following pilot program that began spring 2019)

Coverage Before Dental Benefits Expansion: Emergency services only for most adults

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Coverage After Dental Benefits Expansion: An expanded set of dental services including diagnostic, preventive, periodontal, and restorative, with no annual dollar cap

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Newly Covered Adults: About 800,000 adult Medicaid enrollees

Key Legislative Vehicle: Senate Bill 284 (2018) established Medicaid adult dental pilot program; 2022 budget appropriation for comprehensive adult dental expansion in the Maryland Medical Assistance program under HB6/SB150.

High-Level Takeaway: Advocates can transform tragedy into lasting policy change through incremental implementation, bipartisan coalition-building, strategic use of data, and persistent focus. Incremental steps to advance the integration of oral health into state programs are key to success.

Why This Story Matters: Maryland's experience shows how states can leverage unique health care delivery models, budget opportunities, and diverse coalitions to expand adult dental coverage — even when it requires sustained advocacy over nearly two decades.

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

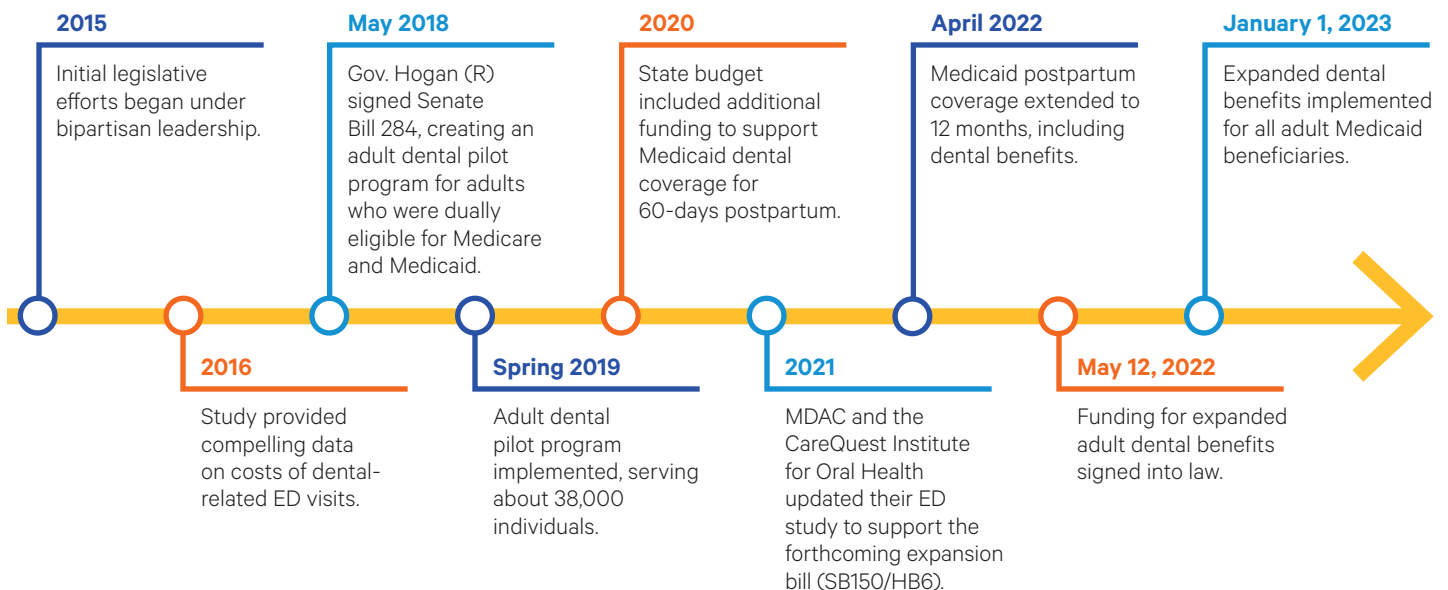
Two dynamics unlocked momentum for an expanded benefit in Maryland: the state's unique [Total Cost of Care Model](#), which incentivizes the delivery of “the right care in the right place,” and compelling data on preventable ED use for dental conditions. To build the record, MDAC commissioned a [2016 Hilltop Institute report](#) on Medicaid dental coverage and costs, followed by an [ED utilization study undertaken with the CareQuest Institute for Oral Health](#).

In FY2016, Maryland adults made 42,327 ED visits for chronic dental conditions at an average charge of \$537 — a \$22.7 million price tag. Medicaid paid for 53% of those visits — more than \$11 million — even though adult Medicaid enrollees made up only 15% of the population. The mismatch pointed to gaps in adult dental coverage and sharpened the fiscal — and human — case for expansion.

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The Journey to Expansion: Policy and Advocacy in Action

MDAC's deliberately incremental approach to expansion built momentum through successive victories — each one making the next step more feasible.



Maryland's 2019 adult dental pilot program for individuals dually eligible for Medicare and Medicaid — who numbered approximately 38,000 that year — proved particularly strategic. By focusing initially on a defined population with clear needs and a manageable budget impact, the state demonstrated feasibility while building evidence for broader expansion. “We knew that this would require a very sizeable investment by the state, and so it couldn't happen overnight. It was a deliberately incremental and long path,” explained Robyn Elliott, managing partner of Public Policy Partners (PPP), which supported MDAC with lobbying efforts.

This incremental approach also shifted the advocacy narrative itself. MDAC and PPP focused heavily on strategic messaging — prioritizing use of terms like “investment” versus “cost,” “coverage” versus “benefit,” and “community” versus “population.” They also shifted internal language from “if we get adult dental” to “when we get adult dental” — signaling a clear momentum shift.

The Power of Coalition Building

MDAC stood at the center of Maryland's advocacy efforts and grew to include more than 1,500 organizations and individuals representing a broad and diverse member, partner, and stakeholder network throughout the state. Under the leadership of Chief Executive Officer Mary Backley, the organization demonstrated exceptional skill in bringing together diverse voices, including behavioral health advocates, nurses, physicians, youth advocates, AARP, and substance use disorder treatment organizations.

One strategic decision proved particularly effective: inviting Maryland Medicaid leadership to speak directly to MDAC's network. As Backley recalled, "One of the best things we did was at our oral health summit in 2018, in the middle of the campaign, we brought senior Medicaid leadership to speak and dialogue with MDAC's network about the adult dental pilot."

This approach fostered partnership rather than confrontation between advocates and state agencies. Ryan Moran, then Maryland's Medicaid director and acting secretary of health, later described the relationship warmly: "We have a very strong relationship with MDAC under Mary's leadership. We're fortunate in Maryland to have a central voice that helps to rally providers and bring in their perspectives."

MDAC's advocacy was further strengthened by its partnership with PPP. The professional lobbying firm provided crucial strategic guidance and legislative connections that helped advocates navigate the complex political landscape.



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— Mary Backley,
Chief Executive Officer,
Maryland Dental Action Coalition

Navigating Political Realities: The Art of Bipartisan Leadership

Maryland's success in expanding adult dental benefits required navigating a complex political environment and careful coalition-building across party lines.

In 2015, legislative champions began introducing bills focused on adult dental benefits. Delegate Mike McKay (R-1C) emerged as an unlikely but passionate advocate for oral health. "My dad always believed in going to the dentist, because you need a good smile to get a good job. Dental was always important to my family and to him," McKay explained, describing the personal connection behind his commitment. He embraced his role with characteristic humor and authenticity, dubbing himself the "Dental Delegate" and later "Senator Smiles" after joining the state senate.

Other bipartisan champions joined him in the 2022 push. Senators Malcolm Augustine (D-47) and Guy Guzzone (D-13), as well as Del. Bonnie Cullison (D-19), helped frame the benefit as common-sense health policy rather than a partisan issue. Advocates connected with them by emphasizing values that resonated across the political spectrum: fiscal responsibility through reduced ED utilization, improved health outcomes, and basic human dignity.

Sen. McKay's leadership proved instrumental in building bipartisan support, with an approach that emphasized relationships over ideology. As he put it, "I wish bills did pass on their merit and how they would benefit the people in the state, but when dealing with humans, you need love, respect, and understanding. That's the secret sauce."

Overcoming Barriers: From Challenge to Opportunity

Even with strong coalitions and bipartisan support, Maryland's path to expanded adult dental benefits faced significant obstacles that required creative problem-solving:

Budget constraints remained the most persistent challenge, as expansion called for a substantial new investment amid competing health care priorities. Advocates addressed this through an incremental implementation strategy that spread costs over multiple years — beginning with the dual-eligible adult dental pilot program — before expanding to all adults. The breakthrough came in 2022 when Maryland experienced a rare budget surplus. This fiscal opportunity, combined with years of relationship-building and advocacy groundwork, made expansion possible.

Provider network adequacy presented another significant concern: would enough dentists participate in Medicaid to ensure beneficiaries could actually access the newly covered services? The state addressed this through targeted reimbursement rate increases designed to encourage dentist participation. By June 2024, 1,270 dentists (32% of all dentists in Maryland) were participating actively. Ongoing recruitment and retention efforts aim to strengthen the network even further.

The state also simplified **implementation logistics** by leveraging existing infrastructure. Maryland already administered dental benefits for children and pregnant

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women through its dental benefits administrator, SKYGEN USA. Extending this infrastructure to all adults was far more straightforward than creating new systems from scratch.

MDAC's partnership with the provider community continues to assist MDH in the implementation of the dental expansion program and address areas for improvement. For instance, pursuant to requests from MDH, MDAC has organized public safety net and private providers twice to meet with Medicaid representatives: discussing state budget allocation for increases in Medicaid adult dental reimbursement rates, as well as components of the benefit.

Implementation and Early Impact: From Policy to People

Maryland's expanded adult dental benefit launched on January 1, 2023, with no premiums, deductibles, copayments, or annual maximum benefit limits. The benefit package includes diagnostic, preventive, restorative, endodontic, periodontic, oral surgery, and emergency services.

Early utilization data show that approximately one-third of eligible adults accessed dental services in the first year. While this may seem modest, it represents hundreds of thousands of adults receiving dental care they previously could not obtain. For a newly implemented benefit, this utilization rate suggests both awareness and demand.

For individuals such as those who testified before the legislature in support of dental benefits expansion over the years, the policy change has been transformative. Adults who previously faced the choice between enduring dental pain or seeking expensive, ineffective ED care can now receive appropriate preventive and restorative treatment.

The state continues to monitor utilization patterns and provider participation through annual reports from the [Maryland Healthy Smiles Dental Program](#), allowing policymakers to identify and address emerging access barriers.

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Lessons for Other States: What Maryland's Story Teaches

Maryland's success offers key lessons for advocates and policymakers in other states:

- **Tragedy can catalyze change, but sustained advocacy is essential:** Deamonte Driver's tragic death created initial momentum for children's oral health care coverage but extending coverage to adults required more than 10 years of incremental steps and strategic expansion of covered communities.
- **Incremental approaches build credibility:** The dual-eligible adult dental pilot program demonstrated feasibility and made expansion politically viable. Starting with a defined population created evidence to support statewide coverage.
- **Align with broader health care reform goals:** Maryland's Total Cost of Care Model created natural synergy between oral health advocacy and state objectives, making buy-in easier to secure.
- **Build diverse, authentic coalitions:** MDAC's 1,500-plus members, partners, and other stakeholders extended far beyond traditional dental groups, giving the coalition credibility and reinforcing the connections between oral health and overall wellbeing.
- **Invest in relationships with champions and agencies:** Strong partnerships with bipartisan legislative leaders and relationships with Medicaid leadership created an environment where change was possible.
- **Be ready when opportunities emerge:** Years of groundwork positioned advocates to act quickly when the 2022 budget surplus created a funding opportunity.
- **Professional advocacy support is critical:** MDAC's partnership with PPP brought lobbying expertise, strategic planning prowess, and legislative connections that strengthened effectiveness.

Current Challenges and Future Priorities

Despite significant progress, Maryland faces ongoing challenges in ensuring access to dental care for adults enrolled in Medicaid. **Provider recruitment and retention** remain critical, with a continued focus needed on reimbursement rates to ensure adequate geographic coverage, particularly in underserved areas. **Budget sustainability** poses concerns as the state transitions from surplus to deficit, requiring continued advocacy to maintain funding.

Benefit enhancements — notably adding denture coverage — remain on advocates' agendas. The state is also managing a **transition to a new dental benefits administrator** while ensuring continuity of care. Finally, **robust data collection and evaluation** of utilization patterns, health outcomes, and cost-effectiveness remain essential for demonstrating program value, supporting continued investment, and identifying areas for improvement.

Looking Ahead

Maryland's journey to coverage for about 800,000 adults demonstrates what persistent advocacy can achieve. The Maryland model — combining incremental implementation, diverse coalitions, bipartisan leadership, alignment with broader health care reform, and strategic use of both data and stories — offers a roadmap for other states.

The state's work continues with efforts to strengthen provider networks and enhance benefits. But this journey has already proven a fundamental truth: expanded adult dental coverage is achievable when advocates combine strategic thinking, authentic partnerships, and unwavering commitment.



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— Senator Mike McKay

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.

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