

Summary of NH Medicaid Dental Benefit

March 2, 2021

Current dental benefit

- Pediatric (age 0 – 20): Comprehensive – includes diagnostic, preventive, restorative, endodontic, periodontic, removable prosthodontic, single crown, oral surgery, and orthodontic services
(Certain oral surgery and orthodontic services must meet specific criteria and receive prior authorization for coverage in accordance with the State Plan)
- Adult (age 21 and up): Emergency only – includes limited exams, diagnostic xrays, and extractions for members who have pain and/or infection

Legislative history of the proposed adult dental benefit

2019

- HB 692 wording is included in HB 4, sections 224 – 227: Laws of 2019, signed by the Governor on September 26, 2019
Includes an appropriation for FY 20/21 of \$500,000 (\$250,000 general funds/\$250,000 federal funds)
HB4 (formerly HB 692) Adult Dental Benefit Working Group holds organizational meeting in September 2019 and has continued to meet as needed to define and refine the adult dental benefit

2020

- SB 754: Introduced February 13, 2020
Detail is added to HB4 that included specific tasks and due dates for DHHS to follow
Vacated from Committee and Laid on Table June 16, 2020
- HB 250: Introduced as legislation relative to oral health, amended several times
Vetoed by the Governor July 28, 2020 and veto sustained September 16, 2020
- SB 754 and HB 250: Fiscal Note Worksheets included Medium and High columns shown below
- August 2020 Plan: DHHS revised cost estimate based on March 2020 Medicaid enrollment and modification of the Medium level benefit

2021

- HB 103 and SB 150 are introduced and are similar, with the exception of the dental benefit implementation dates
Amendments and possible consolidation are expected
Fiscal note worksheets for both bills utilize the August 2020 Plan cost estimate

**New Hampshire Department of Health and Human Services
Medicaid Care Management Program
Adult Dental Benefit Cost Estimates - Nationwide Average Medicaid Fees**

	With \$1,500 Max on Non-preventive procedures		
	Medium May 2020	High May 2020	August 2020 Plan**
PMPM Claim Cost	\$12.50	\$21.50	\$14.25
First Year Pent-Up Demand	1.88	4.30	2.85
Increase Provider Fees to Nationwide Average Medicaid Fees	3.10	5.56	3.69
Projected Service Cost PMPM	\$17.48	\$31.36	\$20.79
Administrative Cost Allowance	2.31	4.15	2.75
Profit/Risk Margin Allowance	0.30	0.54	0.36
Premium Tax (2.0%)	0.41	0.74	0.49
Projected Total Cost PMPM	\$20.50	\$36.79	\$24.38
Additional Considerations			
Cost of Additional Transportation Services	2.60	2.60	2.60
Medical Cost Offsets (e.g., due to reduced emergency department costs)	(0.76)	(0.76)	(0.76)
Net Projected Cost PMPM	\$22.34	\$38.63	\$26.23
State Cost (millions)			
Traditional (50%)	\$5.13	\$8.86	\$5.84
Expansion (10%)	1.27	2.20	1.61
Total State Cost	\$6.40	\$11.06	\$7.45
Federal Cost (millions)			
Traditional (50% FMAP)	\$5.13	\$8.86	\$5.84
Expansion (90% FMAP)	11.45	19.81	14.49
Total Federal Cost	\$16.58	\$28.67	\$20.32

Cost estimates based on December 2019 enrollment
Traditional - 38,237
Expansion - 47,470
Cost estimates based on March 2020 enrollment:
Traditional - 37,085
Expansion - 51,143
Medium: Includes diagnostic, preventive, restorative, oral surgery Excludes fixed and removable prosthodontics, endodontics, and orthodontics
High: Includes diagnostic, preventive, restorative, oral surgery, removable prosthodontics, endodontics Excludes orthodontics and fixed prosthodontics
August 2020 Plan: Includes diagnostic, preventive, restorative, oral surgery, and removable prosthodontics Excludes endodontics, periodontics except for preventive/maintenance, fixed prosthodontics and crowns, and orthodontics

NH Medicaid Federal Medical Assistance Percentages (FMAP)

FMAP

Standard Medicaid	50%
CHIP	65%
Granite Advantage	90%

FMAP under Federal Public Health Emergency

Standard Medicaid	56.2%
CHIP	69.3%
Granite Advantage	90% (The FMAP is not enhanced for this group)

Dental Expenditures SFY 2019

Dental claims (Fee for Service)

Pediatric:	\$25,970,390
Adult:	\$ 2,438,197

Medical claims for dental conditions – Emergency Department

Adult:	\$ 808,743
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Medical claims for dental conditions – Non Emergency Department

Adult:	\$ 984,139
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*Medical claims non-ED is for hospital based dental services for medically compromised/fragile individuals