

October 13, 2020

The Honorable Gregorio Kilili Camacho Sablan
2411 Rayburn HOB
Washington, DC 20515

Dear Congressman Sablan:

On behalf of the American Dental Association (ADA) and our 163,000 member dentists, we are writing to express our support for H.R. 6495, the Insular Area Medicaid Parity Act, bipartisan legislation that would lift the Medicaid funding cap in the U.S. Territories. For Americans who reside in American Samoa, Guam, Puerto Rico, the Northern Mariana Islands, and the U.S. Virgin Islands, this would ensure full access to the benefits of Medicaid, including oral health.

The ADA believes that Medicaid plays an essential role in a state's and territory's oral health care safety net and our association is committed to ensuring that families have access to comprehensive and affordable health coverage, including oral health care coverage. Medicaid and the Children's Health Insurance Program (CHIP), our nation's safety net health insurance programs, currently provide vital coverage to over 70 million Americans, including almost 35 million children.¹ About 7.4% of all adults and 38.5% of all children in the U.S. have dental coverage under Medicaid.²

The Medicaid program continues to be a vital lifeline for vulnerable individuals, families and children. Unfortunately, due to limitations in the funding statute, the Medicaid program operates differently in the U.S. Territories compared to those of the states due to capped funding and a fixed federal medical assistance percentage. This discrepancy results in fewer federal dollars supporting territorial governments which in turn affects the financial viability of their Medicaid programs and threatens oral health coverage and benefits. H.R. 6495 would fix this by removing the cap and allowing the U.S. Territories, all of which cover dental services,³ to be on par with the states.

Numerous reports detail the health and economic disparities that exist for residents of the U.S. Territories, whose geographic locations contribute to more inequalities. For example, natural disasters such as hurricanes and earthquakes have struck Puerto Rico, Guam, the U.S. Virgin Islands and the Northern Mariana Islands. Additionally, almost a decade ago, American Samoa suffered the devastation of a tsunami. All of these jurisdictions have experienced prolonged fiscal challenges resulting in rising levels of unemployment and poverty. Finally, residents of the U.S. Territories have experienced more health challenges compared to their counterparts in the states. According to the Kaiser Family Foundation,

¹ Medicaid.gov, [February 2020 Medicaid & CHIP Enrollment Data Highlights](#), February 2020.

² ADA, [Dental Benefits Coverage in the U.S.](#), November 2017.

³ MACPAC, [Medicaid and CHIP in the Territories](#), April 2020.

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self-reported health is significantly more likely to be fair or poor in Guam (22%) and Puerto Rico (37%) than in the 50 states and D.C. (18%).⁴ The COVID-19 pandemic only exacerbates existing disparities, which is why parity for Medicaid in the U.S. Territories is important to address.

We look forward to passage of this legislation to bring Medicaid parity for the insular areas and would welcome the opportunity to speak with you in more detail and answer any questions you have. Please contact Natalie Hales at halesn@ada.org or (202) 898-2404 to facilitate further discussions.

Sincerely,



Chad P. Gehani, D.D.S.
President



Kathleen T. O'Loughlin, D.M.D., M.P.H.
Executive Director

CPG:KTO:dI

⁴ Kaiser Family Foundation analysis of the 2016 (USVI) and 2017 (50 States and D.C., Guam, Puerto Rico) Behavioral Risk Factor Surveillance System (BRFSS). Significance testing for USVI BRFSS data from 2016 was completed using 2016 BRFSS data for the 50 states and D.C., while significance testing for Guam and Puerto Rico used 2017 BRFSS data. BRFSS data from 2016 and 2017 were not available for American Samoa and Northern Mariana Islands