

June 15, 2010

Dear Senator:

Our organizations ask you to support a provision in the American Jobs and Closing Loopholes Act (H.R. 4213) that would extend the federal medical assistance percentage (FMAP) enhancement to states through June 30, 2011. The funding included in last year's American Recovery and Reinvestment Act (ARRA) allowed states to continue to provide vital health care services to enrollees.

Continuing this funding is critically important for oral health care services, which in many states are barely surviving due to reduced benefits and reimbursement rates. While the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program requires coverage for children's dental services, states have discretion over reimbursement rates, and many are cutting back on critical services. Tennessee's governor has proposed a 7-percent provider reimbursement cut and limitations on selected benefits for non-pregnant adult beneficiaries; Kansas implemented a 10-percent provider reimbursement reduction that went into effect January 1, 2010; and Washington's reimbursements were slashed nearly 6 percent on top of last year's 16 percent cut. These are just a few examples of states struggling to balance Medicaid needs and their budgets.

Further, under current federal law, adult dental services are optional in state Medicaid programs and in 2009 both Utah and Michigan eliminated adult dental. California, which provided more comprehensive adult dental services than most states, drastically reduced benefits for this population.

States need the enhanced FMAP funding more than ever. According to data from the Kaiser Commission on Medicaid and the Uninsured, in 2008 states experienced a 2.1 percent increase in Medicaid enrollment and spending grew by 5.3 percent. More recently, the National Governors Association reported that states face a collective shortfall of \$55.4 billion for fiscal year 2011 and a combined \$136.1 billion in deficits for fiscal years 2010-2012. Providing the FMAP extension to states is vital to ensuring that their Medicaid programs continue to provide a safety net for many vulnerable individuals and families.

Academic dental institutions also depend on enhanced FMAP funding. According to a 1998 ADA report, public assistance programs such as Medicaid and Medicare cover about 50 percent of patients that are seen at dental school clinics. Thirty-two percent of the patients seen in dental schools had no dental insurance. Funds received from Medicaid are critical for maintaining this safety-net option.

Time is of the essence as many states begin their fiscal year on June 30. We strongly urge you and your colleagues in the Senate to include the FMAP extension in the final legislation to ensure that Medicaid programs are able to continue to provide benefits to enrollees across the country.

Sincerely,

Academy of General Dentistry
American Academy of Oral and Maxillofacial Pathology
American Academy of Pediatric Dentistry
American Academy of Periodontology
American Association of Public Health Dentistry
American College of Prosthodontists
American Dental Association
American Dental Education Association
Association of State and Territorial Dental Directors
National Foundation of Dentistry for the Handicapped