

The Issue

Too many low-income adults and children are unable to access dental care through the Medicaid and Children's Health Insurance Programs (CHIP)



Medicaid spending for dental care is approximately 1% of total Medicaid spending.

Every American deserves optimal oral health, but less than 40% of children enrolled in Medicaid had a dental treatment in the past year and only 11 states provide a comprehensive mix of dental services for adults on Medicaid.

Why aren't people getting the care to which they're entitled through Medicaid and CHIP? A slow-growing economy and budget constraints have caused many states to cut or eliminate adult dental Medicaid. Excessive red tape and reimbursement rates that are below the cost of providing care deter dentists who would like to participate in these programs.

Several states have found creative solutions to these challenges. There isn't a one-size-fits-all solution, but successful states have used a combination of these six core strategies.

1. Increase reimbursement rates to at least cover costs. While this is important, it is insufficient on its own to increase provider participation. The other five strategies are essential for success.
2. Simplify administrative processes with efficiencies like a universal claim form, single point of contact for providers, single fee schedule, and electronic claims filing and payment.
3. Educate families and help them navigate the dental health system.
4. Target young children through programs like Head Start.
5. Establish dental homes.
6. Public/private collaboration throughout the system, including: state dental Medicaid directors; dental societies; primary care associations; third party payers; schools; Head Start; public health dentists; and private practice dentists.

Dental Medicaid by the Numbers

0

Number of states that provide full dental coverage for adults on Medicaid.

1%

Approximate percentage of total Medicaid spending for dental care.

24

Number of states that provide no dental care or emergency-only dental care for low-income adults.

60%

Percentage of children enrolled in Medicaid who do not see a dentist annually.

\$143

Amount spent per Medicaid patient annually on dental treatment.

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Solutions at the Local Level

Connecticut: Private Dentist Participation Doubles

Connecticut's low-income families struggled with access to dental health services for a variety of reasons including low private dentist participation. Three strategies led to their success: 1) increase reimbursement rates to the 55th percentile of private insurance fees (2008); 2) simplify Medicaid dental program administration; and 3) recruit providers through the state dental association. After these strategies were implemented:

- Nearly 70% of children continuously enrolled in Medicaid had at least one dental visit per year, a rate higher than privately insured children.
- More than half of all pediatric and general dentists now provide care in the Medicaid dental program.
- Adult dental care utilization also increased.

Alabama: Finding Dental Homes for At-risk Children

Developed by the Alabama Medicaid Agency in partnership with the state's pediatric dentists and pediatricians, the 1st Look Program was designed to reduce early childhood caries by encouraging involvement of primary care physicians in a child's oral health, including referral to a dental home by age one. 1st look improves awareness and detection of early childhood caries by pediatricians, provides oral health education to families, and enlarges the dental provider referral base.

California: Legislators ease access for Denti-Cal patients

California recently adopted a process to expedite Medicaid credentialing for dentists to less than 60 days. In some states this process can take as long as 9 months. Making it easier and quicker for dentists to get credentialed will make it easier and quicker for Denti-Cal patients to receive care.

Nebraska: Improving Access for Rural Population

Public/private collaboration is at the forefront of increasing access to dental care for people on Medicaid in Nebraska. Public health nurses help families navigate the health system, including reminders about their dental appointments. The state also requires that each local public health department have a dentist on the governing board.

The University of Nebraska, College of Dentistry educates dental students to the needs of the low-income, rural population by operating a dental clinic in an underserved area. Officials believe the experience will increase the likelihood that students will serve the needs of this population after graduation. In fact, they have seen an increase in the number of graduates practicing outside the state's urban areas.

Maryland: Three Times More Kids Getting Dental Care

Comprehensive Medicaid improvements in Maryland have tripled utilization of dental care among Medicaid and CHIP-eligible children. Again, simplified administration, increased reimbursement rates, statewide oral health education of parents and caregivers, and public/private collaborations were the keys to success.

- 48% of Medicaid children in Maryland had a dental visit – 8% more than the U.S. average.
- Despite an increase in funding, the overall investment is less than 1% of total Medicaid spending.



Most improved states

on Proportion of Medicaid Children Receiving a Preventive Dental Service

Connecticut (+23%)	Colorado (+17.8%)
Arkansas (+22.7%)	Nevada (+17.3%)
Louisiana (+20.4%)	New Jersey (+16.2%)
District of Columbia (+19.6%)	New Hampshire (+15.2%)
Maryland (+19.2%)	Texas (+13.8%)