

ALASKA STATE LEGISLATURE

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Anchorage

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Representative Berta Gardner
House District 24

Sponsor Statement- House Bill 265

HB 265 – An Act relating to a two year funding cycle for medical assistance coverage for dentures.

HB 265 makes a simple change to the Adult Medicaid Dental program that would allow patients who are approved for dentures to receive both the uppers and lowers in a single fiscal year. The bill would let patients access two years of funding in a single year, thereby allowing them and their dentists to schedule treatment around the oral health of the patient, rather than the bureaucratic ease of the state fiscal year.

Current law places a limit on expenditures per eligible client at \$1,150 per year. This number was designed to pay for ½ of a set of dentures, either uppers or lowers, in a single fiscal year. When the program was created, the idea was that a client who needed dentures could receive one set on June 30th, and the second on July 1st. Unfortunately, this has proven to be impractical. Dentists who are forced to pull teeth can't always do so on the state's fiscal calendar, and Alaskans shouldn't suffer needlessly because their medical emergency occurred in the fall rather than the summer.

Adult Medicaid Dental has been recognized across the political spectrum as a successful government health care program. Over the past three years, the state has saved substantial amounts of money – and poorer Alaskans have been saved immense pain and hardship – by allowing Medicaid to pay for exams, cleanings, fillings, root canals, and dentures before painful and expensive surgery became necessary. HB 265 will fix a small flaw in the cost-containment portion of the program and help protect this important state investment.

HOUSE BILL NO. 265

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SIXTH LEGISLATURE - SECOND SESSION

BY REPRESENTATIVES GARDNER, PETERSEN, AND GARA

Introduced: 1/8/10

Referred: Prefiled

A BILL

FOR AN ACT ENTITLED

1 **"An Act providing for a two-year funding cycle for medical assistance coverage for**
2 **dentures."**

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 * **Section 1.** AS 47.07.067(a) is amended to read:

5 (a) Subject to appropriation, the department shall pay for minimum treatment
6 and for preventative and restorative adult dental services provided under
7 AS 47.07.030(b) and under regulations adopted by the commissioner in conformity
8 with applicable federal requirements and this chapter. Regulations adopted under this
9 section must include the following:

10 (1) except as provided in (e) of this section, a maximum amount of
11 benefits for preventative and restorative adult dental services of \$1,150 for each
12 eligible recipient in a fiscal year; and

13 (2) specification of the scope of coverage for preventative and
14 restorative adult dental services.

1 * **Sec. 2.** AS 47.07.067 is amended by adding a new subsection to read:

2 (e) If the department authorizes or approves payment for complete or partial
3 dentures for an eligible recipient, the department may authorize the payment in one
4 fiscal year of the maximum payment amount for not more than two fiscal years. A
5 recipient is not eligible for additional benefits under this section for a two-year period.

FISCAL NOTE

STATE OF ALASKA
2010 LEGISLATIVE SESSION

Fiscal Note Number: _____
Bill Version: HB265
() Publish Date: _____

Identifier (file name): HB265-DHSS-MAA-2-9-10
Dept. Affected: Health & Social Services
Title: Medicaid Coverage for Dentures
RDU: Health Care Services
Component: Medical Assistance Administration
Sponsor: Gardner, Peterson, Gara
Requester: House HSS
Component Number: 242

Expenditures/Revenue (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information					
	FY 2011	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016
OPERATING EXPENDITURE							
Personal Services	84.5						
Travel							
Contractual	54.8						
Supplies	1.0						
Equipment	7.6						
Land & Structures							
Grants & Claims							
Miscellaneous							
TOTAL OPERATING	147.9	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURE							
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CHANGE IN REVENUES							
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	86.4						
1003 GF Match	61.5						
1004 GF							
1005 GF/Program Receipts							
1037 GF/Mental Health							
Other Interagency Receipts							
TOTAL	147.9	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2010) change: _____

POSITIONS

Full-time	1.0						
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if needed)

HB 265 is meant to address limitations of coverage for upper and lower dentures within a given state fiscal year under the \$1,150 annual limit. The annual limit provides for expenditures that would typically cover only an upper or lower denture, thus requiring Medicaid recipients to wait until the subsequent fiscal year to obtain the opposing denture under the Medicaid program.

The bill would authorize the department to allow for provision of both an upper and lower denture within the same state fiscal year, however when these services are provided the adult recipient would not be eligible for additional services under Medicaid preventative and restorative dental for a two-year period.

Prepared by: William J. Streur, Deputy Commissioner
Division: DHSS Health Care Services

Phone: (907) 334-2520
Date/Time: 2/9/10 9:20 AM

Approved by: Alison Elgee, Assistant Commissioner
DHSS Finance & Management Services

Date: 2/9/2010

FISCAL NOTE

STATE OF ALASKA
2010 LEGISLATIVE SESSION

BILL NO. HB265

ANALYSIS CONTINUATION

The Division of Health Care Services estimates that it will need a total of 1 FTE to fully track expenditures and to authorize procedures up to the limit of the proposed legislation in the first year of the program, prior to modification of the claims payment system (MMIS) to permit automated tracking of expenditures.

Administrative Costs:

1 Medical Assistance Administrator II (Range 18), \$84,510; All personal services costs include benefits. Assumes \$9.6 per FTE annually for office space, phones, and other contractual costs; \$2.6 one time costs per FTE for computers and software; \$5.0 one time costs per FTE for office equipment; \$2.0 per FTE annually for supplies. GF portion of these expenses is 50%.

Medical Assistance Administrator II Duties

If legislation is passed and implemented to allow recipients the ability to utilize two fiscal year's annual cap for dentures (full sets and partials) during SFY2011, it will create a labor intensive process of tracking the service limits manually. Our current Medicaid Management Information System has the capability of applying service exceptions on an annual basis only. Combining two years' limits will initially require a manual work-around for tracking the 11 denture and partial procedure codes being utilized by approximately 4,400 recipients, and follow-up to ensure limits are not exceeded nor services duplicated at any point in the two year period. To authorize payment of individual dental claims, staff will have to research, review, and evaluate the recipients' claims and treatment history for the two year period in question. The division estimates the need for a Medical Assistance Administrator II to handle the increased workload until modifications can be made to the MMIS.

Modification of MMIS

DHSS estimates that it will cost \$50.0 in contractual to modify the present MMIS or enhance the new MMIS currently in development. Part of the development process involves ceasing all modifications to the current MMIS prior to conversion, to ensure that the new system can replicate the functionality of the present system. DHSS assumes that it will not be able to make the necessary modifications prior to the "freeze" of the current system, likely to occur early in the summer of 2010. If DHSS is able to make the modifications before the freeze, it will not fill the position requested. GF portion of the system modification is 25%.

FISCAL NOTE

STATE OF ALASKA
2010 LEGISLATIVE SESSION

Fiscal Note Number:

Bill Version:

HB265

() Publish Date:

Identifier (file name): HB265-DHSS-APDMS-2-9-10

Dept. Affected:

Health & Social Services

Title Medicaid Coverage for Dentures

RDU

Health Care Services

Component

Adult Preventive Dental

Sponsor Gardner, Peterson, Gara

Requester House HSS

Component Number

2839

Expenditures/Revenue

(Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information					
	FY 2011	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016
OPERATING EXPENDITURE							
Personal Services							
Travel							
Contractual							
Supplies							
Equipment							
Land & Structures							
Grants & Claims	935.0		467.5	0.0	0.0	0.0	0.0
Miscellaneous							
TOTAL OPERATING	935.0	0.0	467.5	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURE							
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CHANGE IN REVENUES							
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FUND SOURCE

(Thousands of Dollars)

1002 Federal Receipts	626.5		266.5				
1003 GF Match	308.6		201.0	0.0	0.0	0.0	0.0
1004 GF							
1005 GF/Program Receipt							
1037 GF/Mental Health							
Other Interagency Receipt							
TOTAL	935.0	0.0	467.5	0.0	0.0	0.0	0.0

Estimate of any current year (FY2010) c

POSITIONS

Full-time							
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if nece:

This bill addresses limitations of coverage for upper and lower dentures within a given state fiscal year with the current \$1,150 annual limit. The annual limit provides for expenditures that would typically cover only an upper or lower denture, thus requiring Medicaid recipients to wait until the subsequent fiscal year to obtain the opposing denture under the Adult Preventive Dental (APD) program. The bill would authorize the department to allow for provision of both an upper and lower denture within the same state fiscal year, however when these services are provided the adult recipient would not be eligible for additional services under the APD program for a 2-year period.

In SFY 2009, the total cost of complete, partial and immediate denture claims was approximately \$1,620.0.

(continued on page 2)

Prepared by: William J. Streur, Deputy Commissioner

Division: Health Care Services

Phone: 269-7827

Date/Time: 1/25/10 9:34 AM

Approved by: Alison Elgee, Assistant Commissioner

DHSS Finance & Management Services

Date: 2/9/2010

FISCAL NOTE

STATE OF ALASKA
2010 LEGISLATIVE SESSION

BILL NO. HB265

ANALYSIS CONTINUATION

We estimate that the cost of denture services in the APD has grown at the same rate as all Health Care Services Medicaid Services costs (forecasted to be 6%) from FY 2009 to 2010. Medicaid growth for APD alone is forecasted to be 8.9% from FY 2010 to 2011 to reach a baseline cost of \$1,868.0 for denture services in FY 2011 with no changes to the program.

With the changes proposed in this bill and an expected effective date of July 1, 2010, we estimate the baseline costs noted above for denture services in FY 2011 will increase by 50%, assuming half of denture services recipients would be completing the denture process from FY2010 and the other half would be getting both their upper and lower dentures in FY 2011 for a total cost of \$2,803.0 (a difference of \$935.0 from baseline). We would still expect some increased costs over baseline in FY2012 as the number of people getting denture services has been growing each year as adults continue to learn about the APD program and this bill allows for them to be paid in one year. For FY2012, we estimate the need for increased funds to be half of the amount needed in FY 2011.

For subsequent years, we would expect the cost of denture services to level out to approximately what we would expect without the changes in this bill, the shift being not in cost but in how many recipients are receiving services.

For FY2011, we estimate 67% of APD services to be federally reimbursable, assuming ARRA FMAP increases are valid through all 4 quarters of FY 2011. For FY2012 we expect a FMAP of 50%. As some ADP services are IHS and reimbursed at 100%, we expect 57% of ADP costs to be federally reimbursable.



Alaska Dental Society, Inc.

9170 Jewel Lake Road, Suite 203
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info@akdental.org

The Honorable Johnny Ellis
State Capitol, Rm 103
Juneau, AK 99801 + 1182

5 November 2009

Dear Senator Ellis:

Thank you for sponsoring the legislation to allow Medicaid recipients to utilize two years of benefits to receive a full set of dentures. This will provide a valuable service for Medicaid recipients and will improve the delivery of care for providers. In a true win-win solution this should lessen the overall costs for the Medicaid division when the additional travel costs for delivering the same service twice and the associated medical and dental costs for trying to retain non salvageable teeth during that interim year are factored in.

Respectfully yours

A handwritten signature in black ink that reads "Gary A. Moeller". The signature is written in a cursive, flowing style.

Gary A. Moeller, DDS
President

L O G A N
D E N T A L

November 10, 2009

Senator Ellis
716 W. 4th Ave. Suite 500
Anchorage AK, 99501-2133

Dear Senator Ellis:

Thank you for sponsoring a bill to allow Medicaid recipients to use two consecutive years of supplemental benefits in the same year to receive upper and lower dentures at the same time. This will greatly help recipients as a single denture when you have no teeth to oppose it is of limited value. I believe it will ultimately lower costs for the Medicaid division, also, when travel benefits are factored in for this multi step procedure that must be repeated twice under the current system.

A case I did earlier this year may illustrate the problem providers' face. Due to HIPAA concerns I am not using names for this story.

I have a dental office in Juneau. Unfortunately, for a variety of reasons, dental offices in other Southeast communities do not usually accept new Medicaid patients. This patient had to travel over from Sitka and needed dentures, both upper and lower. He currently did not have either upper and lowers having lost both sets. The supplemental system for adult Medicaid benefits would cover a single denture, either the upper or lower. The patient, 78 years old and on fixed income, was unable to afford the second set even at reduced Medicaid fees. I wrote a letter Medicaid division, enclosed, outlining the problem and pointing out that travel costs associated with constructing the second set at a later date (when the new year's benefits kicked in) would ultimately cost more than the Medicaid fee for a denture. I received a reply from the division basically saying their hands were tied given the current statutes in place.

In the case of this patient I did a full set of dentures for the patient and absorbed the cost of construction of the second set. As I write this letter I saw two patients today in the same situation, one who lives here in Juneau that we are constructing an upper denture alone although he has no lower teeth. Currently are plan is construct the lowers after July

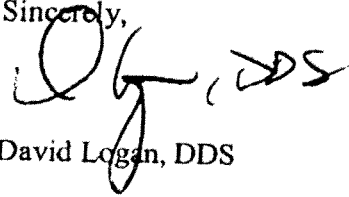
2237 N. Jordan Avenue, Juneau, AK 99801

Phone (907) 780-6066 Fax (907) 780-4274 info@juneausmiles.com

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1, 2010. The second patient traveled here from Angoon and lost both his upper and lower dentures 2 weeks ago. His treatment will be further complicated as his old set was apparently ill fitting and led to a large tissue mass on the lower that will have to be removed prior to denture construction.

Sincerely,



David Logan, DDS

L O G A N
D E N T A L

December 17, 2008

ACS
Preauthorizations
POB 240808
Anchorage, AK 99524-0808

Re: [REDACTED]
Medicaid #: [REDACTED]


Dear Sirs:

Mr. [REDACTED] is currently edentulous (without teeth) upper and lower. We have previously preauthorized Mr. [REDACTED] for a lower denture (preauth [REDACTED]) - working with a Sitka Clinic we had not previously seen Mr. [REDACTED].

Mr. [REDACTED] has been without teeth for 6 years. One denture, the maximum allowed under the MEDS system, will provide little improvement for him. Mr. [REDACTED] will be traveling to our office from Sitka for completion of the denture. The travel costs will ultimately cost more than the fee for the denture given the number of appointments required to properly construct a denture.

I am requesting preauthorization for upper and lower dentures (included) for Mr. [REDACTED]. This is a case where everyone will benefit: the state will have less overall costs than a second round of travel costs to construct the other denture after July 1, Mr. [REDACTED] will have opposing dentures to eat with, and my overall costs will be less than repeating the same appointments come July 1.

Sincerely,

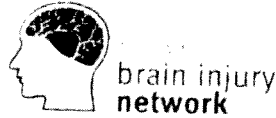

David Logan DDS

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The Alaska Mental Health
Trust Authority



**Governor's Council on Disabilities
and Special Education**

**Advisory Board on Alcoholism
and Drug Abuse**



Alaska Mental Health Board

Adjust Cap on Adult Dental Services Reimbursed by Medicaid

The Governor's Council on Disabilities and Special Education, Alaska Mental Health Board, Advisory Board on Alcoholism and Drug Abuse, and Alaska Commission on Aging, in collaboration with the Alaska Mental Health Trust Authority and the Alaska Brain Injury Network, jointly support the developing a solution that will allow for the adjustment of the current cap on adult dental services reimbursed by Medicaid.

- Currently, the annual cap for dental services – such as cleanings, exams, crowns, root canals and dentures – is \$1,150 per individual. With the rising cost of dental care, this cap is proving not adequate yet the cap is set in statute and has not been increased in over three years.
- The American Dental Association recommends adult preventive and restorative dental services be included in all state Medicaid programs, and as former U.S. Surgeon General C. Everett Koop stated, "You're not healthy without good oral health."
- Trust beneficiaries continue to list dental services as a priority unmet health needs.
- The challenge this session is to find a current bill or to introduce a new bill that will create a method for adjusting the adult dental Medicaid cap on a regular basis or will at least increase the cap to cover the increase the cost of living increases over a 4 or five year period.

Therefore, we support a legislative solution that will allow for the adjustment of the current cap on adult dental services reimbursed by Medicaid.



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November 19, 2009

Honorable Johnny Ellis
Majority Leader
Alaska Senate
716 W. 4th Avenue
Anchorage, AK 99501

Dear Majority Leader Ellis:

On behalf of the 97,000 members of AARP in Alaska, we would like to pledge our support for your bill to establish a two year funding cycle for the adult dental benefit in Medicaid.

We understand you are particularly interested in changing the benefit for dentures so that an adult Medicaid beneficiary would be able to use the funds available for two years to pay for dentures. This makes sense for both the client and the provider.

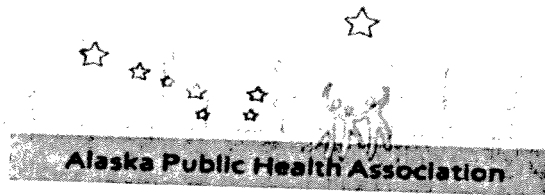
Older persons in need of dentures often have accompanying nutrition problems. These nutrition problems can cause other health issues and create an overall deterioration in health status. For those who need them, dentures are essential to quality health care. Two-year funding for dentures should be considered sensible prevention with the long term possibility of saving Medicaid funds that would not need to be spent of more serious health care problems resulting from poor oral health status.

Should you have any questions about our position, please feel free to contact me (586-3637) or Patrick Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,

Marie Darlin, Coordinator
AARP Capital City Task Force
415 Willoughby Avenue, Apt. 506
Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)



November 6, 2009

Senator Johnny Ellis
Senate Majority Leader
Alaska State Legislature
716 W. 4th Ave
Anchorage, AK 99501
Fax: (907) 269-017

Dear Senator Ellis;

I am writing on behalf of the Alaska Public Health Association (ALPHA) to extend our support for and thank you for introducing a Bill that will allow Alaska's adult Medicaid recipients to receive a set of dentures within one fiscal year. This Act will meet the needs of patients and dental providers by providing two-years worth of dental benefits for dentures in a single year.

The ALPHA represents over 150 health professionals in Alaska; the primary mission of ALPHA is the enhancement of the public's health. In fulfilling our mission, we support systems that support patient-oriented health service delivery. ALPHA believes that the "Act providing for a two-year funding cycle for medical assistance coverage for dentures" establishes a system enabling patients to receive patient-oriented care.

Thank you for consulting ALPHA in developing this Bill. Please feel free to contact me if you have further questions.

Sincerely,

Karol Fink, MS, RD
ALPHA Health Policy Chair
Karolfink@yahoo.com
907.227.8178

SENIOR VOICE

Serving Older Alaskans and Their Families Since 1978

A publication of Older Persons Action Group, Inc. 325 E. Third Ave., Suite 300, Anchorage, Alaska 99501

Vol. 32 No. 11 November, 2009

Desperate senior prompts denture legislation

By SEN. JOHNNY ELLIS

Late last summer, an elderly man walked into my office and threatened to commit suicide. Needless to say, it was a very tense and upsetting situation for me and my staff. This gentleman had come from the Medicaid Adult Dental office, where he had been told that he had a choice - he could receive either the upper half or the lower half of the dentures that he needed, but not both, at least not in the same year. Of course, this set of options was really no choice at all, seeing as how he had no teeth at all. The state's wholly inadequate response to this constituent's unfortunate situation set my office in motion, and I am prepared to introduce legislation this session with bipartisan support that will provide a commonsense fix to an otherwise successful and needed program.

Medicaid Adult Dental was created three years ago. Until that time, Medicaid only covered emergency dental services for low income Alaskans. By expanding the program to cover preventative care - exams, cleanings, root canals, fillings and dentures - the state has saved millions of dollars and patients have avoided painful surgeries as the need for emergency care declines. In addition, good dental health

is closely linked with decreased risk for diabetes, heart disease, cancer and other serious diseases. Last year, the legislature unanimously made this successful program permanent.

The program limits the care that can be paid for in a single year, which is intended as a cost-control measure, an important feature in these uncertain budgetary times. Unfortunately, these measures go beyond cost control and have impacted the function of the program by limiting patients to half of a set of dentures per year. In public testimony on these limits, it was suggested that a patient could receive the upper dentures on June 30, the final day of the state fiscal year, and the lower dentures on July 1. I don't believe that we should be punishing citizens who happen to require dental care in the fall or winter, and I don't believe that dentists should be forced to schedule the care their patients need to make things more convenient for bureaucrats. This is the kind of frustrating flaw in our

system that drives people crazy and gives government a bad name.

That's why I have worked with the Department of Health and Social Services to develop a way to allow patients who qualify for dentures under the Medicaid Adult Dental program to receive their full set of dentures in one sitting, without destroying the cost-control mechanisms currently in place. The bill will be introduced when the legislature goes back into session in January, and I am pleased to have received bi-partisan support from my colleagues in the Senate.

In fact, as I have continued to work on this issue, I have heard more and more about how much sense this small change makes. A dentist in Juneau told me about the patients he sees from all around Southeast Alaska. The state pays for them to fly to Juneau, pays for their lodging, and pays for one half of their dentures. Then, a little while later, public money is spent to do it all over again for the other half. Allowing him and other

I have worked with the Dept. of Health and Social Services to allow patients who qualify for dentures under the Medicaid Adult Dental program to receive their full set of dentures in one sitting.

dentists to consolidate the care they are giving into one session will make the program a more efficient use of public money and improve the quality of care received by patients.

State government can be a large and unwieldy bureaucracy, and change is hard to do and often happens slowly. Most of the attention goes to the big issues that attract press coverage or help generate campaign slogans. But sometimes, there are issues that require us to place people over politics and give a direct benefit to the neighbors and constituents we are privileged to serve. It's too late for the gentleman who threatened to kill himself in my office - we worked with him to get his dentures through the existing two-year process - but it's not too late for others in his situation. This may be a small bill, and it won't change the world, but it will improve the lives of a few senior citizens in need - and that's a job I'm glad to do.

Senator Johnny Ellis represents downtown and midtown Anchorage in the Alaska State Senate and serves as the Majority Leader of the Senate Bi-Partisan Working Group.



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February 10, 2010

The Honorable Wes Keller, Co-Chair
House Health and Social Services Committee
Alaska Capitol, Room 13
Juneau, AK 99801-1182

The Honorable Bob Herron, Co-Chair
House Health and Social Services Committee
Alaska Capitol, Room 411
Juneau, AK 99801-1182

RE: HB 265 (Gardner, Peterson, Gara)—Support
Dear Co-Chairs Keller and Herron:

On behalf of the members of AARP in Alaska, we encourage you and your colleagues on the House Health and Social Services Committee to support HB 265, to establish a two-year funding cycle in Medicaid for a very specific limited purpose. The bill is authored by Representatives Berta Gardner, Pete Peterson, and Les Gara.

HB 265 basically changes the benefit for dentures so that an adult Medicaid beneficiary would be able to use the funds available for two years to pay for dentures. This makes sense for both the client and the provider.

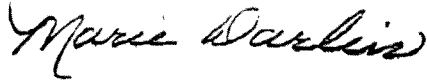
Older persons in need of dentures often have accompanying nutrition problems. These nutrition problems can cause other health issues and create an overall deterioration in health status. For those who need them, dentures are essential to quality health care. Two-year funding for dentures should be considered sensible prevention with the long term possibility of saving Medicaid funds that would not need to be spent on more serious health care problems resulting from poor oral health status.

AARP recommends an "AYE" vote on HB 265.

Should you have any questions about our position, please feel free to contact me (586-3637) or Patrick Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator
AARP Capital City Task Force
415 Willoughby Avenue, Apt. 506
Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)

CC: Vice-Chair Representative Tammie Wilson
Representative Bob Lynn
Representative Paul Seaton
Representative Sharon Cissna
Representative Lindsey Holmes
Representative Berta Gardner
Representative Pete Peterson
Representative Les Gara