

SB

65

Alaska State Legislature

Interim: (May - Dec.)
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Session: (Jan. - May)
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Senator Bettye Davis@legis.state.ak.us
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Senator Bettye Davis

SB 65 "An Act repealing the repeal of preventative and restorative adult dental services reimbursement under Medicaid; providing for an effective date by repealing the effective date of sec. 3, ch. 52, SLA 2006; and providing for an effective date"

Sponsor Statement

The purpose of this bill is repeal the termination date on June 30, 2009 of coverage for adult restorative and preventative dental services under Medicaid. Without this repeal the coverage for adult dental services would revert to minimal treatment for the immediate relief of pain or to reduce the spread of infection. Coverage of adult preventative and restorative dental services under Medicaid began in 2006 with the passage of HB 105.

It has been demonstrated that across the continuum of the average life span, good preventative and restorative oral and dental health is not just a luxury, but a necessity – and far less expensive in the long run. Delaying or under-utilizing dental care causes more harm and expense than preventing or treating problems when they occur. If adult dental services under Medicaid only covered emergencies and abatement of pain and infection, long-term costs of dental care and other preventable medical conditions would increase. Studies have found that lack of preventative and restorative dental services is linked to increased diabetes, cancers, and cardiovascular disease. A correlation also has been found between pre-term low birth-weight babies and delay of necessary dental services.

FISCAL NOTE

STATE OF ALASKA
2009 LEGISLATIVE SESSION

Fiscal Note Number: _____
Bill Version: SB065
() Publish Date: _____

Identifier (file name): SB065-DHSS-APDMS-01-30-09 Dept. Affected: Health & Social Services
Title: Medicaid for Adult Dental Services RDU: Adult Preventative Dental Medicaid
Component: Adult Preventative Dental Medicaid
Sponsor: Davis
Requester: Senate HSS Component Number: 2839

Expenditures/Revenues (Thousands of Dollars)

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

	Appropriation Required	Information						
		FY 2010	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies								
Equipment								
Land & Structures								
Grants & Claims	0.0	6,133.8	7,246.1	7,484.2	7,722.2	7,960.2	8,198.2	
Miscellaneous								
TOTAL OPERATING	0.0	6,133.8	7,246.1	7,484.2	7,722.2	7,960.2	8,198.2	

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

1002 Federal Receipts	0.0	3,531.8	4,309.8	4,429.4	4,570.2	4,711.1	4,853.3
1003 GF Match	0.0	2,602.0	2,936.3	3,054.8	3,152.0	3,249.1	3,344.9
1004 GF							
1005 GF/Program Receipts							
1037 GF/Mental Health							
Other Interagency Receipts							
TOTAL	0.0	6,133.8	7,246.1	7,484.2	7,722.2	7,960.2	8,198.2

Estimate of any current year (FY2009) cost: _____

POSITIONS

Full-time							
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if necessary)

This bill eliminates the sunset date of June 30, 2009 on enhanced dental services for adult Medicaid recipients. Services for adult Medicaid recipients would otherwise revert to emergent dental services (treatment for immediate relief of pain and acute infection), only. During FY2008 about 7,600 adults received treatment under this program. Forecasted expenditures are based on an analysis of paid claims. The estimated federal portion is based on projected federal financial participation rates for 2010 through 2015. The fiscal note amount for 2010 anticipates continuation of the adult dental program without anticipating program growth. FY 2010 projections will be updated to reflect the most recent trends during the course of the legislative session.
(continued on page 2)

Prepared by: William J. Streur, Deputy Commissioner Phone: 279-7827
Division: Health Care Services Date/Time: 1/29/09 12:00 AM

Approved by: William H. Hogan, Commissioner Date: 1/30/2009
Dept. Health & Social Services

FISCAL NOTE

STATE OF ALASKA
2009 LEGISLATIVE SESSION

BILL NO. SB065

ANALYSIS CONTINUATION

In April 2007, Alaska began providing preventive and restorative dental care for adults age 21 and older enrolled in Medicaid. The Legislature established a three year trial period to evaluate the new program, which will end June 30, 2009, if not reauthorized. Services provided under the Adult Preventative Dental Medicaid program must be preauthorized and are subject to a \$1,150 annual cap per individual. Services include exams, cleanings, fillings, root canals and dentures. Total program costs are limited to fiscal limits set by the legislature, ensuring that total program spending remains within the budgeted amount.

The Adult Preventative Dental Medicaid program helps protect and promote the health of Alaskans by improving affordable access to dental care services to the nearly 40,000 eligible adult Alaskans enrolled in Medicaid annually. During fiscal year 2008 about 7,600 adults received treatment under this program. In the past, Medicaid only treated emergency pain relief and acute infection for adult dental needs. This coverage expansion was added because infections in the mouth are no different than infections in other parts of the body. Dental infections cause pain and lost time at work, and affect overall health. Waiting until a dental emergency occurs can result in more expensive dental care. Missing teeth can affect employability.

The Alaska Mental Health Trust Authority contributed to state matching funds during the first three years of the program but will not do so after June 30, 2009. Fund source calculations for this fiscal note assume only GF match for the state portion. The federal portion is estimated for 2010 through 2015 based on the proportion of tribal and Title XIX reimbursable costs as forecast for 2010, and the estimates of federal matching percentages for 2010 through 2015. Approximately 18% of the claims are eligible for Indian Health Services which receives 100% federal reimbursement. The remaining 82% of claims are eligible for regular title XIX FMAP, which is projected to average 51.21% for state FY2010, 50.36% for FY2011 and 50% for FY 2012 to FY 2015.

LEGAL SERVICES

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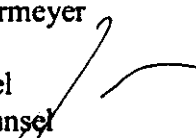
State Capitol
Juneau, Alaska 99801-1182
Deliveries to: 129 6th St., Rm. 329

MEMORANDUM

January 30, 2009

SUBJECT: SB 65 Sectional Summary (Work Order No. 26-LS0224\R)

TO: Senator Bettye Davis
Attn: Tom Obermeyer

FROM: Jean M. Mischel
Legislative Counsel 

You have requested a sectional summary of the above-described bill.

As a preliminary matter, note that a sectional summary of a bill should not be considered an authoritative interpretation of the bill and the bill itself is the best statement of its contents. If you would like an interpretation of the bill as it may apply to a particular set of circumstances, please advise.

Section 1. Repeals two sections, secs. 3 and 5, from HB 105, 24th Legislature. HB 105 provided broader medicaid coverage for adult dental services for a three year period. Section 3 of HB 105 revived the previous definition of "adult dental services" that limited medicaid reimbursement to minimal treatment that was being temporarily repealed in the bill. Section 5 provided a sunset date of June 30, 2009, for the higher level of dental services added in HB 105.

Section 2. Makes this bill retroactive to June 30, 2009, to avoid a conflict with HB 105's effective dates if this bill passes after that date.

Section 3. Repeals section 7 of HB 105, 24th Legislature. Section 7 of HB 105 provided a delayed effective date of July 1, 2009, to revive the minimal treatment definition of "adult dental services" provided in sec. 3 of HB 105.

Section 4. Provides an immediate effective date for this bill.

JMM:ljw
09-049:ljw

SB 65 - Adult Dental Services under Medicaid

Talking Points

Focus on Prevention

- **Healthy smiles = improvement in employment opportunities.** Decayed or missing teeth can be a significant factor in employability and/or job advancement. Welfare recipients who received rehabilitative dental treatment (including fillings, extractions, and dentures) were "...twice as likely to receive favorable or neutral employment outcomes as they were to receive unfavorable employment outcomes."¹
- **Improvement in dental care access helps those most in need.** The American Dental Association recommends that adult preventive and restorative dental services be included in all state Medicaid programs. Alaska tribal health programs and community health centers have embraced adult preventative and restorative dental care under Medicaid and are providing such care to those most in need.

Reduction in Medicaid Expenses

- **Prevention = reduction in Medicaid expenses for adult emergency care.** Preventive and restorative dental care avoids many emergencies and costly care later. Prior to the enactment in 2006 of HB 207 which added adult preventative and restorative dental care under Medicaid, adult dental services were limited to expensive emergency care for relief of pain and acute infection only and often included expensive, painful, and avoidable extraction of permanent teeth.
- **Possible reduction in Medicaid expenses for clients with chronic diseases.** Studies show links between oral health and other systemic/chronic disease including diabetes and cardiovascular disease.²
- **Possible reduction in Medicaid expenses for children with poor birth outcomes.** Maternal periodontal disease is linked with pre-term, low birth-weight (PTLBW) births. One recent study indicated women with periodontal disease are 7.5 times more likely to have a PTLBW baby.³
- **Annual cap controls costs.** The maximum cap of \$1,150 per adult encourages the dentist and client to discuss priorities and treatment options, which in some cases can pay for a set of dentures over a two-year period. ?

¹ "Dental Treatment Highly Effective in Helping Welfare Recipients Gain Employment", University of California – San Francisco School of Dentistry, press release, March 10, 2004.

² Okero, CA et al., "Tooth Loss and Heart Disease: Findings from the Behavioral Risk Factor Surveillance System" *American Journal of Preventive Medicine*, 2005; 29:5 (supplement 1)

³ Lief S, Hared H, McKaig R et al., "Periodontitis and Preterm Low Birth Weight in Pregnant Women" *Journal of Dental Research*, 2000;79(supplemental):608

Improved Overall Health

- **Alaskan children will experience better dental health and less dental infection.** Studies show increased risks of early childhood caries in infants with mothers/caregivers who have active dental decay due to transmission of bacteria.⁴
- **Alaskan adults will experience less dental decay and periodontal disease.** While much of the focus on dental decay is on children, adults remain at high risk for two common health problems: dental decay and periodontal disease. Cancer treatment and medications that reduce saliva flow can further elevate risk for oral diseases.⁵

⁴ Li Y et al., "Characterization of Maternal Mutans Streptococci Transmission in an African American Population." *Dental Clinics of North America* 2003; 47(1):87-101.

⁵ "Oral Health for Older Americans", Centers for Disease Control (2004), Retrieved February 13, 2006 from: <http://www.cdc.gov/OralHealth/factsheets/adult-older.htm>



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February 2, 2009

The Honorable Bettye Davis, Chair
Senate Health, Education and Social Services Committee
Alaska State Capitol, Room 30
Juneau, AK 99801-1182

RE: SB 65 (Davis)—Support

Dear Chair Davis:

On behalf of the members of AARP in Alaska, we encourage your colleagues on the Senate Health and Social Services Committee to support SB 65, authored by you and co-sponsored by your Committee colleague Senator Johnny Ellis.

SB 65 would eliminate the sunset date on the adult dental benefit in the Medicaid program. This program has proven to be invaluable over the past years not only for dental exams, prevention, and treatment but also for providing dentures, primarily to older Alaskans in long term care facilities. In addition, adults who had low incomes and qualified for Medicaid were able to see a dentist and have the restorative work completed that allowed them to be able to successfully participate in job interviews.

Older Alaskans who have dental problems, missing teeth, or are in need of dentures often have accompanying nutrition problems. These nutrition problems can exacerbate other health issues and create an overall deterioration in health status. AARP believes that dental care is essential to quality health care. Funding for dental care 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.

The current program has a limit of \$1,150 per year per Medicaid beneficiary. Originally this figure was used because it was the amount that would pay for either upper or lower dentures. We understand that the average cost for dentures has gone up to \$1,700 or \$1,800 for just one set. We recommend that some appropriate increase in the annual benefit be included with the passage of SB 65. If possible, some form of "cost of dentures" inflation could be built into the program to keep up with dental inflation.

AARP requests an "AYE" vote on SB 65.

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

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 Joe Paskvan
Senator Johnny Ellis
Senator Joe Thomas
Senator Fred Dyson

Don Burrell

RECEIVED

From: david logan [drdave@acsalaska.net]
 Sent: Saturday, January 31, 2009 12:47 PM
 To: Sen. Johnny Ellis; Sen. Bettye Davis; Sen. Fred Dyson; Sen. Joe Paskvan; Sen. Joe Thomas
 Subject: SB65 and SB82
 Attachments: Alaska Dental Society Medicaid Priority List.doc

FEB 02 2009

Senate HESS Committee Members

This week all Legislators will receive a mailing from the Alaska Dental Society (ADS) on dental issues in Alaska. One of our focus areas this legislative session will be on dental Medicaid and changes we believe are long overdue to the Medicaid system. At this point in the legislative session we offer cautious support for SB65 and its companion bill HB26. We have had preliminary discussions with the House sponsor, Rep. Hawker but were unable to discuss our position with committee members before Monday's hearing. The ADS feels it would be better to repeal the sunset date rather than extending as the Governor's bill, SB82 does.

A letter outlining the ADS position on Medicaid will be in our packet of information; I have copied a portion below:

A limited "Adult Dental" Medicaid program that provides for basic preventative and restorative services to adults is set to sunset this year. The Alaska Dental Society **cautiously supports** the continuation of this program and the expansion of our Alaska Denali Kid Care Program under the State Children's Health Insurance Program (SCHIP).

While the intent of both of these programs is good -- to increase the level of dental care within the state, the fact is that the existing Medicaid delivery system for dental benefits is already severely strained and discourages dentists from participating.

Therefore the ADS recommends that bills repealing the sunset of the adult Medicaid program and extending adult benefits and bills expanding eligibility for the Denali Kid Care include meaningfully changes to the Medicaid program that will remove barriers to participation by providers.

To this end, the ADS has been working with coalitions of health care groups, advocacy groups, along with representatives of the Medicaid Division and private practitioners over the past two years. Progress has been made on some of the issues, while others remain a "work in progress." The ADS has become convinced that without legislative a mandate some or all of the progress that has been made may fall by the wayside.

The ADS is planning an informal meeting in February with legislators, the Medicaid program leaders and other stakeholders. We will be asking about dates shortly and hope that a time can be chosen to allow as many to participate as possible.

A separate sheet is enclosed listing some of the key issues and reasons change is needed is attached

If there are any questions on the issues raised I can be reached at drdave@acsalaska.net or 723-2884.

David Logan, DDS
 Legislative Chair, Alaska Dental Society

Alaska Dental Society Medicaid Priority List

- Removal of dentistry from state audits.
 - Superseded by federal audits
 - General consensus that this can be done
- Reimburse provider for treatment if patient is eligible for services at initial treatment date.
 - Currently payment will be denied if patient is eligible when treatment started but ineligible when treatment completed.
 - Key dental procedures such as crowns and dentures require 2-3 weeks to be completed after treatment is begun.
 - Insurance industry standard is 30 days to complete treatment if patient is eligible for benefits at time of initial treatment
- Provide yearly reimbursement adjustments.
 - Yearly increases will provide consistency and fairness to offset cost of delivering care. The 8 year gap between rate adjustments before fees were adjusted last year caused providers to drop out.
 - Set reimbursement at 65th percentile of UCR from a verifiable source.
- Remove eligibility from non federally mandated recipients who chronically abuse system.
 - Patients who schedule appointments and fail to show or cancel
 - Patients who use travel benefits then fail to show for appointments
 - Patients who engage in drug seeking
- Have Medicaid act as secondary insurance for non EPSDT recipients
 - Current system for patients with private insurance and Medicaid is confusing
 - Cost to Medicaid system would be less then acting as sole primary payer and forgoing private insurance
- Remove Hold Harmless provision from provider agreement
 - Opinion from AG's office it can be removed
 - Little legal consequence
 - Barrier to participation by providers

STATE OF ALASKA

DEPT. OF HEALTH & SOCIAL SERVICES

Alaska Commission on Aging

SARAH PALIN, GOVERNOR

P.O. BOX 110693
JUNEAU, ALASKA 99811-0693
PHONE: (907) 465-3250
FAX: (907) 465-1398

January 31, 2009

The Honorable Bettye Davis, Chair
Senate Health and Social Services Committee
Alaska State Capitol, Room 30
Juneau, AK 99801-1182

Subject: Support Letter for SB 65

The Alaska Commission on Aging (ACoA) encourages support of SB 65, a bill to reauthorize preventive and restorative dental services for adult Medicaid recipients, sponsored by you and co-sponsored by Senator Ellis. Medicaid coverage for these services will sunset June 30, 2009 without legislative reauthorization.

Good nutrition is vital for health and wellness across the life span and depends on oral health. Dental pain, missing and decayed teeth affect dietary choices for seniors which impacts overall health and wellness. Without preventive and restorative dental services, which include exams, fillings, extractions, and dentures, older vulnerable Alaskans are at risk of developing dental infections that have been associated with periodontal disease, diabetes, pneumonia, and other chronic diseases including cardiovascular disease. Currently, Medicaid dental services are limited to expensive emergency care for immediate relief of pain and acute infection, with no coverage for preventative and restorative dental care. These limited services often lead to extraction of permanent teeth.

Children can also benefit from the enhanced Medicaid adult dental program. Research has shown that bacteria involved with the dental decay process are typically passed from parent to child or from grandparent to grandchild, in situations where the grandparent is the primary caregiver, and that part of the efforts to reduce dental decay in young children relates to reducing the level of dental infection in the caregiver. Moreover, primary caregivers with dental coverage are more likely to access dental services for their children.

In addition to the health issues involved, decayed or missing teeth can be a factor in employability or job advancement, which is of concern to all persons seeking employment, regardless of age. Preventive and restorative dental services result in fewer tooth extractions for Medicaid clients and offer increase chance of employment.

Preventive and restorative dental services can help prevent the progression of serious dental disease and discomfort which may result in more costly emergency care. These services contain future Medicaid costs for emergency dental work, assist in chronic disease prevention, and promote healthy lifestyles.

Since inception on April 1, 2007 through September 30, 2008, this program has served 9,267 unduplicated persons with 283 providers participating who have performed 42,268 procedures. During FY 2008 alone, 7,470 Alaskans received services through this program.

Because infections in the mouth are no different than infections in other parts of the body, ACoA believes that the enhanced dental program should continue for as long as possible and we appreciate the retroactive feature of your bill that extends coverage if the legislation is passed after the sunset date. We also suggest that the cap for services be reexamined in light of current costs for providing dental care. According to estimates from the National Dental Advisory Service, for example, the estimated median charge in Alaska for a complete set of dentures is in excess of \$2,900.

ACoA supports SB 65 and believes that this program is a wise public investment that will help reduce expensive emergency dental needs, associated costs in health care, and enhance health and wellness for elderly Alaskans. Please feel free to contact Denise Daniello, ACoA's executive director (465-4879), should you have any questions regarding our position. Thank you for your consideration.

Sincerely,



Sharon Howerton-Clark
Chair Alaska Commission on Aging

Sincerely,



Denise Daniello
ACoA Executive Director

- CC: Senator Joe Paskvan, Vice-Chair
Senator Johnny Ellis
Senator Joe Thomas
Senator Fred Dyson



P.O. Box 240247 " Anchorage, AK 99524 " www.asdha.com

February 26, 2009

Senator Bettye Davis
State Capitol, Room 30
Juneau, AK 99801-1182

Re: Support for SB 65 - Medicaid for Adult Dental Services

Dear Senator Davis:

The Alaska State Dental Hygienists' Association (ASDHA) supports Senate Bill 65. As dental hygienists, we are a community of professionals devoted to the prevention of disease and the promotion and improvement of the public's health. There is a strong body of evidence that supports the relationship between oral health and overall health. It is crucial that individuals in our state have access to and receive dental care. Medicaid coverage for adult dental services provides funding for individuals in our state in need of assistance, and potentially experiencing untreated dental disease. SB 65 will continue to provide dental coverage for these Alaskans and ultimately aid in employability and cost effective care for the state. The ASDHA supports SB 65, and is hopeful more legislation in the future will address issues surrounding Medicaid reimbursement and increased funding for oral health care in Alaska.

Sincerely,

Gail Walden

Gail Walden
Alaska State Dental Hygienists' Association

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