Introduced

Senate Bill 648

BY SENATORS TAKUBO, MANN, MARONEY, PREZIOSO,
STOLLINGS, WELD, BALDWIN, CLINE, HARDESTY,
LINDSAY, PALUMBO, PLYMALE, UNGER, AND ROBERTS

[Introduced January 29, 2020; referred
to the Committee on Health and Human Resources;
and then to the Committee on Finance]
A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section, designated §9-5-12a, relating to providing dental coverage for adult Medicaid recipients; providing limitations; and designating the Department of Health and Human Resources as the responsible department to implement these provisions.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

§9-5-12a. Medicaid program; dental care.

(1) The Legislature finds that:

(a) Medical and social research demonstrate dental care is vitally important for everyone and significantly affects overall health, employability and social inclusion, Dental diseases are caused by bacterial infections spread through contact with saliva, without treatment are progressive in nature, and pose a serious threat to public health; and

(b) Lack of dental care is a recognized indicator of greater likelihood of chronic illnesses and poor health outcomes; and

(c) Preventive dental care and early treatment to maintain health have been shown to be a more financially efficient form of care resulting in reduced expenditures to treat other chronic and serious conditions; and

(d) Many West Virginians, including those residents enrolled in Medicaid, who live in rural areas, or are experiencing a disability are frequently unable to find or see a dentist or pay for dental care; and

(e) West Virginians with disabilities, of whom approximately 50 percent are insured by Medicaid, have been disparately impacted by the lack of coverage and furthermore have additional difficulties as many dental practices are not inclusive of people experiencing disabilities; and

(f) The Department of Health and Human Resources is responsible for funding, promotion of access and quality, maintaining healthcare infrastructure—especially in rural areas, and
payment policies that influence the behavior of providers and determine their financial viability; and

(g) Dental patients now struggle to have complete health and providers are less likely to participate in Medicaid when denied the ability to resolve oral disease; and

(h) Similarly situated states who reduced their adult dental coverage under Medicaid reported increases in dental-related Emergency Department visits and costs for adults while at the same time experiencing a significant drop in children’s dental-related Emergency Department visits after dental coverage became an Essential Health Benefit for children; and

(i) Hospital Emergency Departments are not trained nor equipped to definitively resolve dental diseases and often provide only palliative care and/or antibiotics for temporary relief of chronic and acute bacterial infections; and

(j) West Virginians have increasingly turned to opioids to self-manage painful oral diseases; and

(k) West Virginians who successfully complete treatment for opioid misuse are suffering in their inability to get adequate dental care to improve their chances of employment after rehabilitation.

(2) The department shall extend Medicaid coverage to adults covered by the Medicaid program for dental services. This coverage is limited to $1000 each budget year. Recipients must pay for services over the $1000 yearly limit. Medically necessary emergency services, dentures, and partials are exempt from the $1000 limit. No provision in this article shall restrict the department in exercising new options provided by or to be in compliance with new federal legislation that further expands eligibility for dental care for adult recipients.

(3) The department is responsible for the implementation and program design for a dental care system to reduce the continuing harm and continuing impact on the healthcare system in West Virginia. The dental health system design shall include oversight, quality assurance measures, case management, and patient outreach activities. The department shall assume
responsibility for claims processing in accordance with established fee schedules and financial aspects of the program necessary to receive available federal dollars and to meet federal rules and regulations. The department shall promulgate emergency rules pursuant to the provisions of §29A-3-15 of this code. 

(4) Beginning January 1, 2021, the department shall provide no less than $1000 for the reimbursement rates under the Medicaid program for dental care for adults.

NOTE: The purpose of this bill is to expand the Medicaid program to include dental coverage for adult recipients, to establish an amount of coverage available, to identify the responsible state department and to provide emergency rule-making authority.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.