## WEST VIRGINIA LEGISLATURE 2023 REGULAR SESSION

## **Committee Substitute**

for

## Senate Bill 269

By Senators Takubo, Woelfel, Roberts, Deeds,
Oliverio, Nelson, and Queen
[Originating in the Committee on Health and Human
Resources; reported on January 20, 2023]

A BILL to amend and reenact §9-5-12a of the Code of West Virginia, 1931, as amended, relating to dental coverage; increasing coverage amount; requiring the Bureau for Medical Services to conduct a state-specific rate survey; requiring the Bureau for Medical Services to base the rate it pays dentists on average rate for these services; providing effective date; requiring the Bureau for Medical Services to provide education to Medicaid enrollees regarding the availability of coverage; and requiring reporting.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

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

- (a) The following terms are defined:
- (1) "Cosmetic services" means dental work that improves the appearance of the teeth, gums, or bite, including, but not limited to, inlays or onlays, composite bonding, dental veneers, teeth whitening, or braces.
- (2) "Diagnostic and preventative services" means dental work that maintains good oral health and includes oral evaluations, routine cleanings, x-rays, fluoride treatment, fillings, and extractions.
- (3) "Restorative services" means dental work that involves tooth replacement, including, but not limited to, dentures, dental implants, bridges, crowns, or corrective procedures such as root canals.
- (b) The Department of Health and Human Resources Bureau for Medical Services shall extend Medicaid coverage to adults age 21 and over covered by the Medicaid program for diagnostic and preventative dental services and restorative dental services, excluding cosmetic services. This coverage is limited to \$1,000 \$2,000 each budget year. Recipients must pay for services over the \$1,000 \$2,000 yearly limit. No provision in this section 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.

- (c) The Department of Health and Human Resources Bureau for Medical Services is responsible for the implementation of, and program design for, a dental care system to reduce the continuing harm and continuing impact on the health care system in West Virginia. The dental health system design shall include oversight, quality assurance measures, case management, and patient outreach activities. The Department of Health and Human Resources Bureau for Medical Services 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 of Health and Human Resources Bureau for Medical Services shall seek authority from the Centers for Medicare and Medicaid Services to implement the provisions of this section.
- (d) The provisions of this section enacted during the 2020 regular legislative session shall only become effective upon approval from the federal Centers for Medicare and Medicaid Services of the provider tax as set forth in §11-27-10a of this code.
- (e) The Bureau for Medical Services shall conduct a state-representative survey of dental fee rates in the United States and base the rate in West Virginia on the average rate for these services.
- organizations to provide education to Medicaid enrollees on a quarterly basis regarding the availability of the benefits provided in this section on August 1, 2024, and ending on July 1, 2029. The Bureau for Medical Services shall file an electronic report, via the Legislative web page, on July 1, annually, with the Legislative Oversight Commission on Health and Human Resources Accountability regarding the number of Medicaid enrollees that have accessed the program by year, the number of providers that have joined the program by year, and the top 10 services provided by year.
  - (g) The amendments to this section are effective on July 1, 2024.

NOTE: The purpose of this bill is to increase the coverage limit and to require the Department of Health and Human Resource to require its Medicaid managed care organizations to provide education to Medicaid enrollees regarding the availability of benefits provided in this section beginning on July 1, 2024, and to require reporting.

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