

# WEST VIRGINIA LEGISLATURE

## 2024 REGULAR SESSION

Introduced

### Senate Bill 374

FISCAL  
NOTE

By Senators Takubo, Woelfel, Plymale, and Maroney

[Introduced January 12, 2024; referred  
to the Committee on Health and Human Resources;  
and then to the Committee on Finance]

1 A BILL to amend and reenact §9-5-12a of the Code of West Virginia, 1931, as amended, relating to  
 2 increasing the coverage limit; requiring the Department of Health and Human Resources  
 3 to require its managed care organizations to provide education to Medicaid enrollees  
 4 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.**

1 (a) The following terms are defined:

2 (1) "Cosmetic services" means dental work that improves the appearance of the teeth,  
 3 gums, or bite, including, but not limited to, inlays or onlays, composite bonding, dental veneers,  
 4 teeth whitening, or braces.

5 (2) "Diagnostic and preventative services" means dental work that maintains good oral  
 6 health and includes oral evaluations, routine cleanings, x-rays, fluoride treatment, fillings, and  
 7 extractions.

8 (3) "Restorative services" means dental work that involves tooth replacement, including,  
 9 but not limited to, dentures, dental implants, bridges, crowns, or corrective procedures such as  
 10 root canals.

11 (b) ~~The Department of Health and Human Resources~~ Bureau for Medical Services shall  
 12 extend Medicaid coverage to adults age 21 and over covered by the Medicaid program for  
 13 diagnostic and preventative dental services and restorative dental services, excluding cosmetic  
 14 services. This coverage is limited to ~~\$1,000~~ \$2,000 each budget year. Recipients must pay for  
 15 services over the ~~\$1,000~~ \$2,000 yearly limit. No provision in this section shall restrict the  
 16 department in exercising new options provided by, or to be in compliance with, new federal  
 17 legislation that further expands eligibility for dental care for adult recipients.

18 (c) ~~The Department of Health and Human Resources~~ Bureau for Medical Services is  
 19 responsible for the implementation of, and program design for, a dental care system to reduce the

20 continuing harm and continuing impact on the health care system in West Virginia. The dental  
21 health system design shall include oversight, quality assurance measures, case management,  
22 and patient outreach activities. The ~~Department of Health and Human Resources~~ Bureau for  
23 Medical Services shall assume responsibility for claims processing in accordance with established  
24 fee schedules and financial aspects of the program necessary to receive available federal dollars  
25 and to meet federal rules and regulations. The ~~Department of Health and Human Resources~~  
26 Bureau for Medical Services shall seek authority from the Centers for Medicare and Medicaid  
27 Services to implement the provisions of this section.

28 (d) The provisions of this section enacted during the 2020 regular legislative session shall  
29 only become effective upon approval from the federal Centers for Medicare and Medicaid Services  
30 of the provider tax as set forth in §11-27-10a of this code.

31 (e) The Bureau for Medical Services shall conduct a survey of dental rates in the United  
32 States and base the rate in West Virginia on the average rate for these services on or before July  
33 1, 2025.

34 (f) The Bureau for Medical Services is responsible for requiring its managed care  
35 organizations to provide education to Medicaid enrollees on a quarterly basis regarding the  
36 availability of the benefits provided in this section beginning July 1, 2024, and ending on July 1,  
37 2029. The Bureau for Medical Services shall file an electronic report, via the Legislative web page,  
38 on July 1, annually, with the Legislative Oversight Commission on Health and Human Resources  
39 Accountability regarding the number of Medicaid enrollees that have accessed the program by  
40 year, the number of providers that have joined the program by year, and the top 10 services  
41 provided by year.

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, 2025, 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.