

WEST VIRGINIA LEGISLATURE

2026 REGULAR SESSION

Introduced

House Bill 5661

FISCAL
NOTE

By Delegates J. Cannon, Statler, Lucas, Mazzocchi,

Dittman, Holstein, Amos, Shamblin, Hornby,

Fehrenbacher, and Drennan

[Introduced February 17, 2026; referred to the

Committee on House Health and Human

Resourcesthe Judiciary]

1 A BILL to amend and reenact §9-5-12a of the Code of West Virginia, 1931, as amended, relating to
2 Medicaid dental care; and increasing Medicaid dental provider reimbursement rates.

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 Human Services shall extend Medicaid coverage to adults aged 21
12 and over covered by the Medicaid program for diagnostic and preventative dental services and
13 restorative dental services, excluding cosmetic services. This coverage is limited to \$2,000 per
14 two-year budget period. Recipients must pay for services over the \$2,000 limit. No provision in
15 this section shall restrict the department in exercising new options provided by, or to be in
16 compliance with, new federal legislation that further expands eligibility for dental care for adult
17 recipients.

18 (c) The department is responsible for the implementation of, and program design for, a
19 dental care system to reduce the continuing harm and continuing impact on the health care system
20 in West Virginia. The dental health system design shall include oversight, quality assurance
21 measures, case management, and patient outreach activities. The department shall assume

22 responsibility for claims processing in accordance with established fee schedules and financial
23 aspects of the program necessary to receive available federal dollars and to meet federal rules
24 and regulations. The department shall seek authority from the Centers for Medicare and Medicaid
25 Services to implement the provisions of this section.

26 (d) On or before December 1, 2027, the Bureau for Medical Services shall file a report with
27 the Legislative Oversight Commission on Health and Human Resources Accountability and the
28 Joint Committee on Government and Finance analyzing Medicaid expenditures related solely to
29 the dental program for the plan year immediately prior to the passage of this legislation and each
30 plan year until the date of submission of the required report. The report shall include at a minimum
31 an analysis of the enrollees served, the state share of the Medicaid expenditures, and the federal
32 share of expenditures.

33 (e) On December 1, 2028, the Bureau for Medical Services shall increase dental-related
34 fees by at least 20 percent.

NOTE: The purpose of this bill is to increase Medicaid dental provider reimbursement rates.

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