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# A BILL FOR AN ACT

RELATING TO MEDICAID BENEFITS.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. The legislature finds that oral disease is a  
2 significant health problem among many Hawaii residents,  
3 affecting their overall health and well-being. Since 2010,  
4 Hawaii has received a failing grade of "F" in three oral health  
5 report cards published by the Pew Center of the States due to  
6 multiple policy and systems issues in the State that has left  
7 the oral health of Hawaii's families and children in a state  
8 that is worse than the rest of the nation.

9           Access to regular oral healthcare varies greatly across the  
10 State, with rural and neighbor island residents and persons with  
11 low-income families experiencing greater access issues.  
12 Currently, approximately 180,000 adult medicaid beneficiaries  
13 are not getting the benefit of early oral disease detection and  
14 treatment for better overall health. Lack of access to dental  
15 coverage and oral healthcare is a health and social justice  
16 issue that disproportionately affects the poor, children, the  
17 elderly, and racial and ethnic minority groups.



1           In 2009, the State of Hawaii terminated all preventative  
2 and restorative dental care services for adult medicaid  
3 recipients and replaced it with emergency room services that are  
4 limited to pain relief, injuries, trauma, and tooth removal and  
5 extraction. Nationally, studies have shown that reducing or  
6 eliminating medicaid adult dental benefits has led to  
7 significant increases in dental-related emergency room visits  
8 and associated costs. In 2012 alone, Hawaii medicaid paid  
9 \$4,800,000 for 1,691 adults for emergency room visits for  
10 preventable oral health problems, according to the department of  
11 health's Hawaii Oral Health: Key Findings report.

12           In Hawaii, a disproportionate number of adult medicaid  
13 beneficiaries ages twenty-one and older utilize emergency dental  
14 services. While they are twenty-five per cent of Hawaii's  
15 population, they represent fifty-six per cent of all emergency  
16 dental services. Just over 3,000 emergency room visits for  
17 acute oral health conditions occurred in 2016, totaling over  
18 \$17,000,000 in direct costs, a cost that has more than doubled  
19 since 2007. Data also indicated that rural residents of the  
20 State, primarily from the north shore of Oahu and the islands of



1 Kauai and Hawaii, were more likely than urban residents to go to  
2 the emergency room for dental problems.

3 The lack of preventative and restorative dentistry services  
4 for adult medicaid beneficiaries increases potential health care  
5 complications and costs for individuals living with diabetes,  
6 including an increased incidence of gum disease, increased  
7 difficulty controlling diabetes and an increased likelihood of  
8 coronary artery disease. These complications can all lead to  
9 increased disability and death. For diabetic medicaid  
10 beneficiaries, increased access to dental care could result in a  
11 cost savings between \$118,000 and \$1,700,000 for diabetic  
12 medical care for all beneficiaries, according to 2019 estimates  
13 by the Healthy Policy Institute of the American Dental  
14 Association.

15 For pregnant adult medicaid beneficiaries, ensuring good  
16 oral health during pregnancy may reduce pregnancy complications  
17 such as pre-eclampsia, giving birth too soon, or having low  
18 birth-weight babies. The average cost of services for the birth  
19 of a healthy newborn is approximately \$5,000. In contrast, the  
20 cost of services for a premature or underweight newborn can  
21 range from \$200,000 to \$2,000,000.



1 Poor oral health is clinically proven to have serious  
2 adverse impact on overall health and well-being. It is linked  
3 to an array of acute and chronic health conditions including  
4 heart disease, diabetes, stroke, depression, low birth weight,  
5 and premature birth among others. Tooth decay is almost  
6 completely preventable. However, preventive services, early  
7 diagnosis, and interventions that can halt or slow the  
8 progression of most oral diseases is currently unavailable to  
9 adult medicaid beneficiaries in the State. Problems that could  
10 have been addressed early, or even prevented, continue to  
11 progress, leading to poor health outcomes and lower quality of  
12 life.

13 Dental care coverage is positively associated with access  
14 to and utilization of oral healthcare. Research indicates that  
15 children and adults with dental coverage are significantly more  
16 likely to seek and use regular dental services than those who  
17 are uninsured.

18 Individuals enrolled in medicaid have an increased  
19 likelihood of disparities in health care outcomes based on  
20 income. The prevalence of dental disease and tooth loss is  
21 disproportionately high among low-income populations.



1 Insufficient coverage or access to care often further  
2 disadvantages medicaid recipients, driving poor health outcomes  
3 and higher costs.

4 Expanded adult dental benefits can have tremendous positive  
5 impacts on state medicaid populations. It has been shown that  
6 individuals with dental benefits are forty-two per cent more  
7 likely to have a dental checkup within the year than individuals  
8 who do not have coverage. Parents who receive dental care are  
9 also more likely to take their children to the dentist as well.

10 Medicaid provides federal funds for health care coverage to  
11 eligible individuals with low incomes, including children and  
12 their parents, pregnant women, the elderly, and persons with  
13 disabilities. The federal government will match up to fifty per  
14 cent of a state's investment in reinstating preventative and  
15 restorative dental benefits for adult medicaid beneficiaries.

16 Although comprehensive dental coverage is mandatory for  
17 children enrolled in medicaid, dental benefits for medicaid-  
18 eligible adults are optional. Currently, thirty-four states  
19 offer comprehensive or limited preventive and restorative  
20 benefits to adults on medicaid.



1 Adding expanded dental services benefits for the State's  
2 adult medicaid enrollees will reduce the number of acute oral  
3 health-related emergency room visits and improve these  
4 individuals' chronic disease risks and overall health status.  
5 Current estimates on costs of restoring expanded benefits to  
6 adult medicaid recipients in Hawaii that will provide a range of  
7 preventive and restorative benefits for recipients to help  
8 maintain and improve their oral health are being developed by  
9 the department of human services MedQuest division.

10 It has been over a decade since the State removed all but  
11 emergency medicaid adult dental benefits. The legislature finds  
12 that it is in the best interest of the State and its residents  
13 to expand access to care by restoring dental benefits to adult  
14 medicaid enrollees. Accordingly, the purpose of this Act is to  
15 appropriate funds to restore diagnostic, preventive, and  
16 restorative dental benefits to adult medicaid enrollees.

17 SECTION 2. There is appropriated out of the general  
18 revenues of the State of Hawaii the sum of \$7,000,000 or so much  
19 thereof as may be necessary for fiscal year 2020-2021 to restore  
20 diagnostic, preventive, and restorative dental benefits to adult  
21 medicaid enrollees; provided that the department of human



1 services shall obtain the maximum federal matching funds  
2 available for this expenditure.

3 The sums appropriated shall be expended by the department  
4 of human services for the purposes of this Act.

5 SECTION 3. This Act shall take effect on July 1, 2020.

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JAN 21 2020





# H.B. NO. 2249

**Report Title:**

Adult Dental Benefits; Medicaid; Appropriation

**Description:**

Makes an appropriation to restore certain adult dental benefits to medicaid enrollees. Requires maximization of federal matching funds.

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