THE SENATE THIRTIETH LEGISLATURE, 2019 STATE OF HAWAII

S.B. NO. 467

JAN 1 8 2019

A BILL FOR AN ACT

MAKING AN APPROPRIATION TO RESTORE ADULT DENTAL BENEFITS TO MEDICAID ENROLLEES.

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. Access to 4 regular oral health care varies greatly across the State, with rural and neighbor island residents and persons with low-income 5 families experiencing greater access issues. Lack of access to 6 7 dental coverage and oral health care is a social justice issue 8 that disproportionately affects the poor, children, the elderly, 9 and racial and ethnic minority groups.

Poor oral health can have serious adverse impacts and is linked to an array of acute and chronic health conditions, including heart disease, diabetes, stroke, depression, low birth weight, and premature birth, among others. Poor oral health can negatively affect employment and the economic strength of the State and impact an individual's health status and self-image. Untreated dental disease can result in a loss of productivity in



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1 the work place, due to absenteeism, under-employment, and 2 unemployment. Tooth decay is almost completely preventable; 3 however, people who are unable to see a dental provider do not get the preventive services, early diagnosis, and interventions 4 5 that can halt or slow the progression of most oral diseases. 6 Problems that could have been addressed early, or even prevented, continue to progress, leading to lower quality of 7 8 life and poor health outcomes. Dental care coverage is 9 positively associated with access to and utilization of oral 10 health care. Research indicates that children and adults with 11 dental coverage are significantly more likely to seek and use 12 regular dental services than those who are uninsured.

13 Having dental benefits is a key factor in an individual's 14 ability to access dental care. Individuals enrolled in medicaid 15 have an increased likelihood of health disparities. The 16 prevalence of dental disease and tooth loss is 17 disproportionately high among low-income populations. 18 Insufficient coverage or access to care often further 19 disadvantages medicaid recipients, potentially driving worse 20 health outcomes and higher costs. Expanded adult dental 21 benefits can have tremendous positive impacts on state medicaid

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populations: It has been shown that individuals with dental benefits are forty-two per cent more likely to have a dental checkup within the year than individuals who do not have coverage. Parents who receive dental care are also more likely to take their children to the dentist as well.

6 Nationally, studies have shown that reducing or eliminating 7 medicaid adult dental benefits has led to significant increases 8 in dental-related emergency room visits and associated costs. 9 Ensuring that low-income adults have access to comprehensive 10 dental coverage can improve employability and can lead to better 11 health management.

12 Medicaid provides state and federally-financed health care 13 coverage to certain groups of people with low incomes, including 14 children and their parents, pregnant women, the elderly, and 15 persons with disabilities. Although comprehensive dental 16 coverage is mandatory for children enrolled in medicaid, dental 17 benefits for medicaid-eligible adults are optional. As a 18 result, medicaid adult dental coverage varies tremendously 19 across states. Most states provide only limited or emergency-20 only coverage; Hawaii is one of thirteen states that cover

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dental care only for pain relief or emergency care for injuries,
trauma, or extractions.

3 According to a 2015 report from the American Dental 4 Association, dental visits to emergency rooms nationwide 5 continue to increase. In 2012, emergency room dental visits 6 cost the United States health care system \$1,600,000,000 7 billion, at an average cost of \$749 per visit. The report also 8 estimated that up to seventy-nine per cent of emergency room dental visits could be diverted to community settings saving 9 10 about forty-eight per cent of the cost of each visit. In 2016, 11 there were nearly 5,000 emergency room visits related to dental 12 problems in the State, costing more than \$6,600,000, a cost that 13 more than doubled since 2007. Data indicated that medicaid 14 recipients made up more than half of emergency room visits 15 related to dental care. Data also indicated that rural 16 residents of the State, primarily from the north shore of Oahu 17 and the islands of Kauai and Hawaii, were more likely than urban 18 residents to go to the emergency room for dental problems.

19 Adding expanded dental services benefits for the State's 20 adult medicaid enrollees will reduce the number of acute oral 21 health-related emergency room visits and improve these

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individuals' chronic disease risks and overall health status.
Current estimates on costs of restoring expanded benefits to
adult Medicaid recipients in Hawaii range from \$500 to \$1000 per
year per adult, providing a range of preventive and restorative
benefits for recipients to help maintain and improve their oral
health.

7 It has been nearly a decade since the State removed all but 8 emergency medicaid adult dental benefits. The legislature finds 9 that it is in the best interest of the State and its residents 10 to expand access to care by restoring dental benefits to adult 11 medicaid enrollees. Accordingly, the purpose of this Act is to 12 appropriate funds to restore diagnostic, preventive, and 13 restorative dental benefits to adult medicaid enrollees.

14 SECTION 2. There is appropriated out of the general 15 revenues of the State of Hawaii the sum of \$ or so 16 much thereof as may be necessary for fiscal year 2019-2020 and 17 the same sum or so much thereof as may be necessary for fiscal 18 year 2020-2021 to restore preventative and restorative adult 19 dental benefits to medicaid enrollees; provided that the 20 department of human services shall obtain the maximum federal 21 matching funds available for this expenditure.

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

3 SECTION 3. This Act shall take effect on July 1, 2019.

INTRODUCED BY:

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Report Title:

Medicaid; Adult Dental Benefits; Appropriation

Description:

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Makes an appropriation to the department of human services to restore full adult dental benefits to medicaid enrollees. Requires federal matching funds.

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