LeadingAge Maryland - 2024 - SB 600 - study - dentUploaded by: Aaron Greenfield

Position: FAV



576 Johnsville Road Sykesville, MD 21784

TO: Finance Committee

FROM: Leading Age Maryland

SUBJECT: Senate Bill 600, Maryland Medical Assistance Program - Dental Services -

Coverage and Rate Study

DATE: February 16, 2024

POSITION: Favorable

LeadingAge Maryland <u>supports</u> Senate Bill 600, Maryland Medical Assistance Program - Dental Services - Coverage and Rate Study

LeadingAge Maryland is a community of more than 140 not-for-profit aging services organizations serving residents and clients through continuing care retirement communities, affordable senior housing, assisted living, nursing homes and home and community-based services. Our mission is to expand the world of possibilities for aging in Maryland. We partner with consumers, caregivers, researchers, public agencies, faith communities and others who care about aging in Maryland.

Senate Bill 600 requires the Maryland Department of Health to study the feasibility of including removable full and partial dentures and setting adequate reimbursement rates for providers on a per–patient basis for house calls and extended care facility calls among the coverage offered by the Maryland Healthy Smiles Dental Program. The Department must report its findings from the study to the Senate Finance Committee and the House Health and Government Operations Committee by December 1, 2024.

Oral health impacts general health. The mouth is the primary access point for the nutrition and oxygen every living body needs to survive. Good oral health is an essential part of overall wellbeing. Poor dentition can lead to (by mouth) intake which leads to all sorts of other issues- weight loss, wound development, cognitive decline, malnutrition, increased need for (by mouth) medications with various side effects.

A number of Medicaid programs in other States cover all or part of the cost of dentures. They include:

- Medicaid covers dentures for Alaskans with prior authorization.
- Idaho's Medicaid program considers dentures to be therapeutic devices and covers them.
- Partial and complete dentures are covered under Louisiana's Medicaid program.
- Michigan's Medicaid program, known as Healthy Michigan, covers partial and full dentures for adults.
- Medicaid in Montana covers dentures, and dentures do not count toward the perrecipient dental treatment services cap of \$1,125.
- Nevada's Medicaid covers full and partial dentures to replace missing teeth on an emergency basis.
- In New York, dentures, oral surgery and periodontal services are covered for adults under New York Medicaid.
- In North Carolina, dentures are a covered expense under North Carolina's Medicaid program.
- In North Dakota, dentures are available for Medicaid recipients under age 18 in North Dakota.
- In South Dakota, Medicaid covers the cost of dentures, including dentures that exceed the \$1,000 annual dental coverage limit for adults.

Proper dental coverage is critical to overall health and provides patients with a sense of dignity - being able to smile with confidence, talk with others and consume the least restrictive food texture. LeadingAge Maryland fully supports studying the feasibility of Medicaid coverage for full or partial dentures.

For these reasons, LeadingAge Maryland respectfully requests a <u>favorable report</u> on Senate Bill 600.

For more information, please contact Aaron J. Greenfield, Greenfield Law, LLC, 410.446.1992

HB 103 & SB 600.pdf Uploaded by: Charles Doring Position: FAV



CHARLES A. DORING, D.D.S., F.A.G.D.
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Testimony in Support of HB 103 & SB 600

Submitted by Charles A. Doring DDS

Thank you for the opportunity to provide my reasonings why HB 103 / SB 600 should be supported. I am on the medical staff of the Hebrew Home of Greater Washington and provide portable dentistry in long term care facilities as well as the homebound. I am a general dentist in Rockville, MD and a Maryland Healthy Smiles (Dental Medicaid) provider. I am also a member of the University of Maryland School of Dentistry Deans Faculty and also on the Maryland Healthy Smiles Provider Advisory Board but speaking today as an individual.

According to the NIH National Institute of Dental & Craniofacial Research April 2022 Bulletin on Oral Health in America "In adulthood, the relationship between oral health and overall health becomes more apparent and manifests in various ways, impacting quality of life. Oral diseases can affect individuals' ability to eat, speak, and smile, and are associated with certain health conditions". Numerous studies have found a connection between oral inflammation and heart disease, dementia, pneumonia, diabetes, and premature & low weight child birth. Several of these medical conditions exist with our older patients who may also lack the ability to perform activities of daily living such as tooth brushing. Many of our elderly patients are unable to have routine professional dental care provided in the traditional dental office. To truly expand access to dental care, I have been teaching dental students and dental hygiene students the benefit of being able to perform portable or mobile dentistry. "House Calls or Extended care facility calls" are not a covered procedure under the current Maryland Healthy Smiles (MHS) dental Medicaid program.

Also related to aging can be the lack of teeth. Proper mastication of food is needed as the initial function of our digestive system. Lack of some or all teeth results in poor chewing efficiency, increased risk of aspiration of food particles resulting in choking, change in diet let alone issues of smiling and low self-esteem due to unesthetic appearance. Dental extraction of hopeless and infected teeth is a covered benefit under the MHS program but providers are unable to provide dentures to replace missing teeth. This leaves the provider and patient with very few options such as charging the patient or trying to locate a charitable organization that will pay the dental laboratory fee while the dentist performs gratis care. One charity, the Maryland Foundation of Dentistry currently has a backlog of 400 patients waiting for care (communication with their executive director).

HB 103 & SB 600 would have the Maryland Depart of Health study the cost and benefit of adding dental coverage to the MHS program for "house/extended care facility calls" as well as removable dentures. This dental coverage benefit is needed to assist some of our most dentally and medically challenged patients, many who can not advocate on their own behalf.

For the reasons stated above, I ask that the committees please give HB 103 & SB 600 a favorable report.

MSDA Supports SB 600.pdfUploaded by: Daniel Doherty

Position: FAV



The Maryland State Dental Association Supports SB 600 -Maryland Medical Assistance Program – Dental Services – Coverage and Rate Study

Submitted by Daniel T. Doherty, Jr. on Behalf of the Maryland State Dental Association

According to the US Census Bureau, American Community Survey 2021, a total of 41.1 million Americans live with disabilities – 12.6% of the US population. The percentage of Marylanders age 65 and above who have independent living difficulties is between 12 and 14%. These individuals have significant medical complications and/or cognitive disability. Many have significant dental issues, including dental neglect, that can complicate the patient's medical conditions. Dental Medicaid providers have also seen a significate number of patients with missing or hopeless teeth who have been unable to obtain removable dentures because dentures are not a covered benefit under the Maryland Healthy Smiles Program (The Dental Medicaid Program). Many of these patients are unable to maintain a proper diet due to lack of teeth leading to medical issues and conditions arising from lack of proper nutrition. These patients also experience significant social/self-image problems.

The Adult Dental Medicaid benefit was restored in Maryland on 1/1/2023 and the Maryland Department of Health estimates 800,000 adults have qualified to be covered under this program. A significant number of this adult population are homebound or living in Long Term Care Facilities. Transporting many of these patients to traditional dental offices is not possible. If special medical transportation is available, the cost for such transportation is often more costly than the dental services that would be provided.

The Maryland Healthy Smiles Provider Advisory Board members have requested the Maryland Health Department to extend benefits to ADA CDT procedure code D9410 for each patient seen. The code is defined as "house /extended care facility call" (includes visits to nursing homes, long-term care facilities, hospice sites, institutions, etc."). The Health Department has taken no action. Providing mobile or portable dentistry has increased dental providers' costs due to the need for additional equipment, transportation of staff, time out of office, and additional treatment coordination with nurses, nurses' aides, physicians, physical therapists, dietitians, and the patient's family/caregivers. The education at University of Maryland School of Dentistry encourages students to provide outreach dental care for those who can not avail themselves of traditional dental office treatment. Without adequate reimbursement for such care, there is little incentive to provide such services. Medicaid providers have also asked the Health Department to consider having a covered benefit for partial and complete dentures, but again no action has been taken to date.

SB 600 would require the Maryland Department of Health to study the costs and benefits of adding dental coverage to the Maryland Healthy Smiles program for "house/extended care

facility calls" as well as removable dentures. The legislation would require the Maryland Department of Health to study the feasibility to include among the benefits offered by Medicaid Dental Program, with minimal restrictions: 1) removable full and partial dentures; and 2) reimbursement of providers on a per-patient basis for house and extended care facilities calls. The Department in setting rates for reimbursement for these services, shall establish the reimbursement amounts at a level that ensures that all dental providers are reimbursed adequately to provide access to care, and the rates are not less than 60% of the average commercial rates for all payors in the State who offer the services. If the average commercial rates cannot be determined, the Department shall use the benchmark charges of the American Dental Association Current Dental Terminology (CDT) Code of the services.

The study required under the bill directs the Department to solicit input from chapters of national professional dental organizations, and advocacy groups that work to improve the oral health of the State's low-income populations.

SB 600 will quantify the need for including coverage for reimbursement for dental visits to the home bound and long-term residents of nursing homes etc., and provide coverage for full and partial dentures. The study will be using recognized and reliable sources for determining proper coverage and reimbursement rates.

Passage of SB 600 will help ensure needed dental services for some of Maryland's most dentally compromised citizens These dental benefits will improve the nutrition of these individuals, improve their associated health conditions, and thus, in time, will lower the overall costs of their medical care.

For these reasons the Maryland State Dental Association requests that SB 600 be given a favorable report.

Submitted by: Daniel T. Doherty, Jr. February 14, 2024