

NEVADA MEDICAID CHILDHOOD DENTAL PROGRAM AND EXPANSION OF ADULT DENTAL MEDICAID BENEFITS

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OUTLINE:

- Nevada's Childhood Dental Program
 - Preventive goals and national ranking
 - EPSDT CMS 416 Year to Year Comparison
 - Child Dental Utilization and Costs Data
- Nevada's Adult Dental
 - Background Information
 - What Medicaid Currently Covers for Adult Dental Utilization and Costs Data
 - Pregnancy Dental Coverage Utilization and Costs Data
 - Emergency Room Dental Utilization and Costs Data
- What Other States are Doing for Adult Dental Expansion
- Nevada Medicaid Proposal for Adult Dental Expansion:
Budget Concept
- Common Strategies for Medicaid Adult Dental Expansion

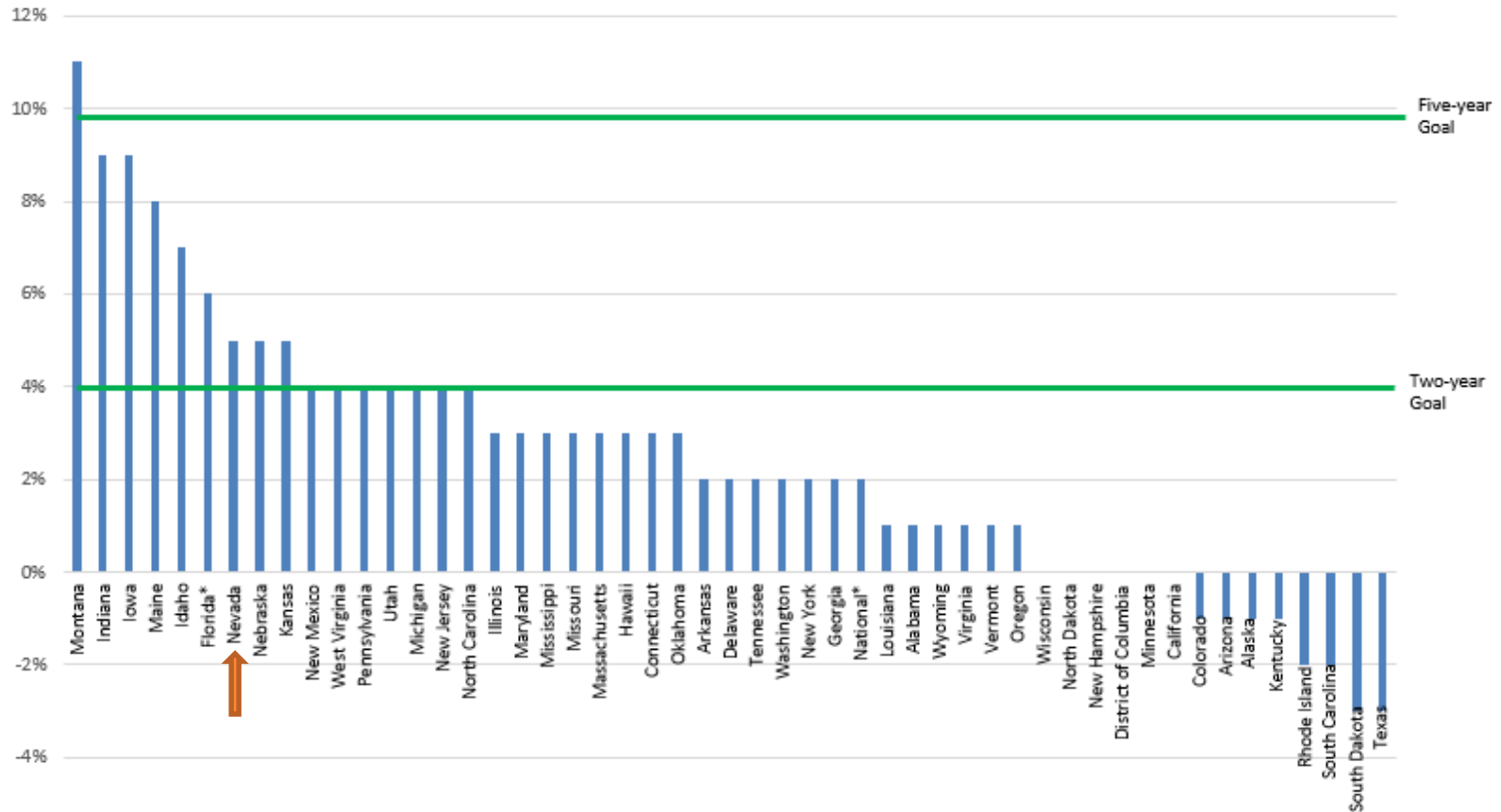
CMS ORAL EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT (EPSDT) HEALTH INITIATIVE – UTILIZING THE CMS 416 (EPSDT) REPORT

○ Goals:

- Increase by 10 percentage points the proportion of Medicaid and CHIP children ages 1 to 20 (enrolled for at least 90 days) who receive a preventive dental service:
 - Baseline year is FFY 2011. National Baseline is 42%.
 - Progress in FFY 2013. National rate is 44%
 - Goal year is 2015. National Goal is 54%
- Dental Treatment Services: Sealants
 - Increase by 10 percentage points of Eligible Children ages 6 to 9, enrolled for at least 90 continuous days, who received a dental sealant on a permanent molar.

Source: <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/OHIBaselineGoals.pdf>.

PROGRESS ON PREVENTIVE DENTAL SERVICES GOAL FFY 2011 – FFY 2013 – NEVADA RANKED # 7 (IN PERCENTAGE INCREASE)

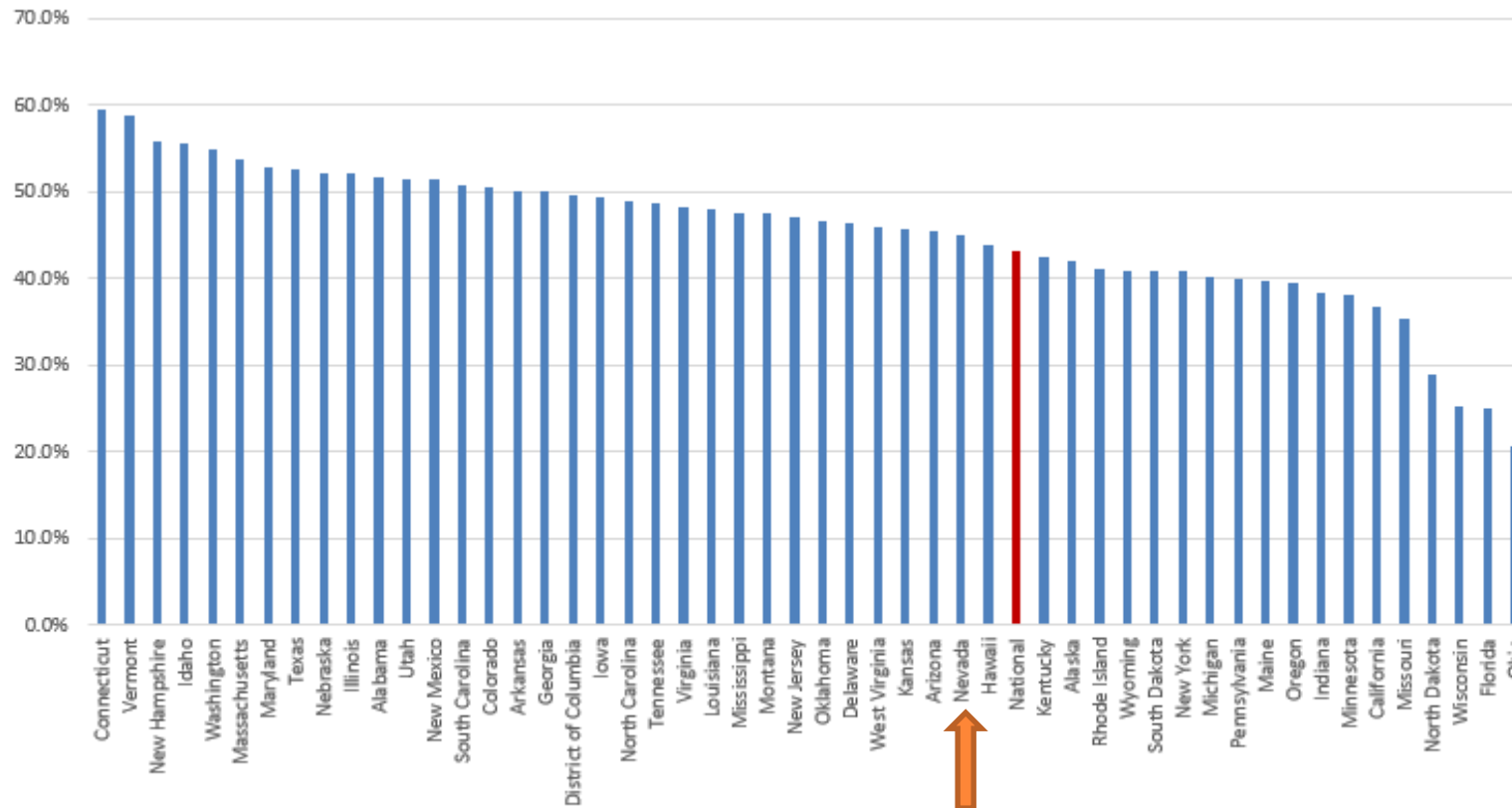


Source: FFY 2011-2013 CMS-416 reports, Line 1b, 12b

Note: *FFY 2011 data for Ohio and Florida are not available. Data for Florida has been substituted with FFY 2012 data. Data for Ohio has been excluded. Estimates for Florida are included in the National figure. Data has been rounded.

Source: <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/downloads/learninglabslides10.pdf>

PERCENTAGE OF CHILDREN, AGE 1-20, WHO RECEIVED ANY PREVENTIVE DENTAL SERVICE FFY 2013 – NEVADA RANKED # 32

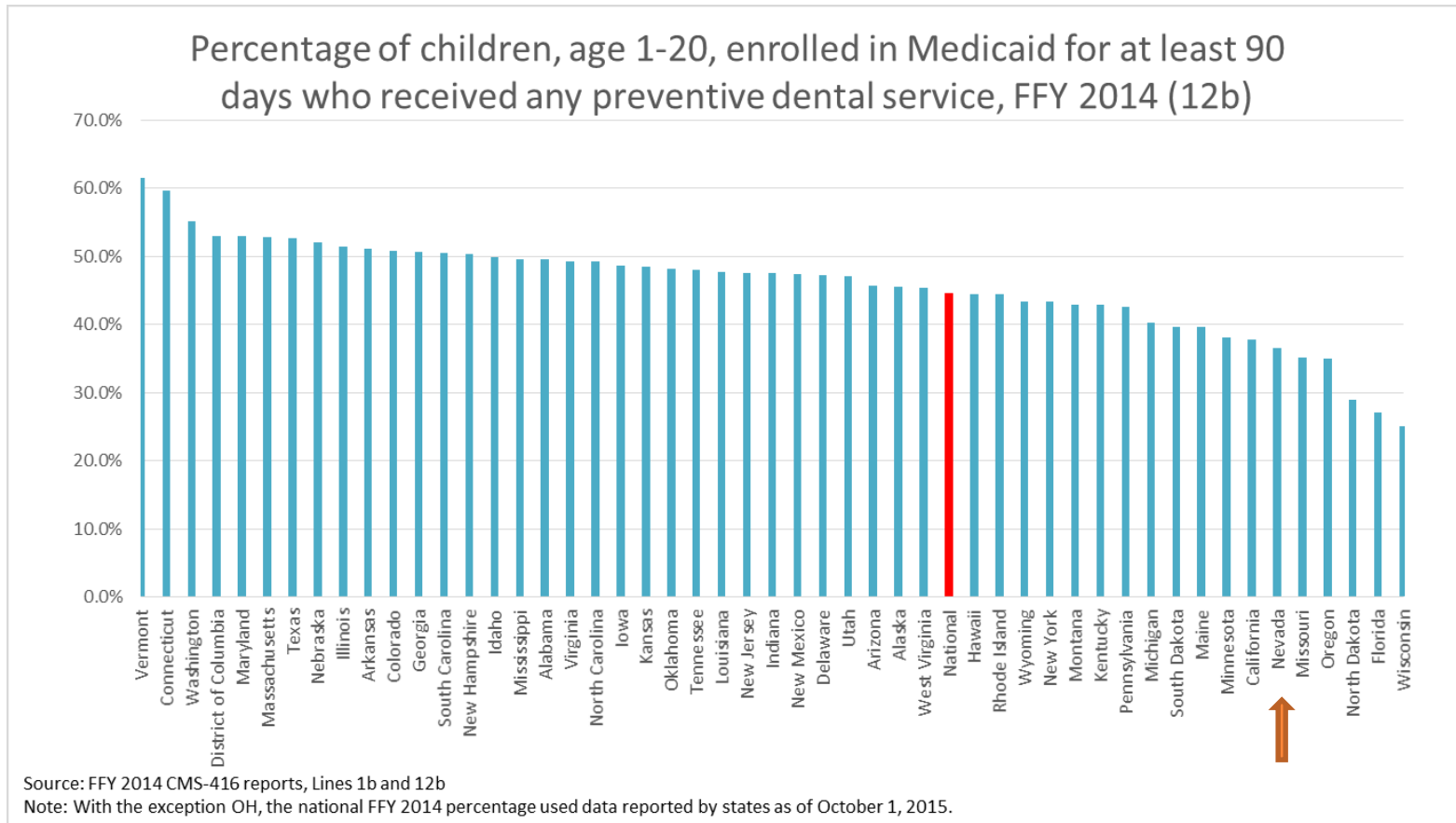


Source: FFY 2013 CMS-416 reports, Line 1b, 12b

Note: Data reflects updates as of 10/22/14.

Source: <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/downloads/learninglabslides10.pdf>

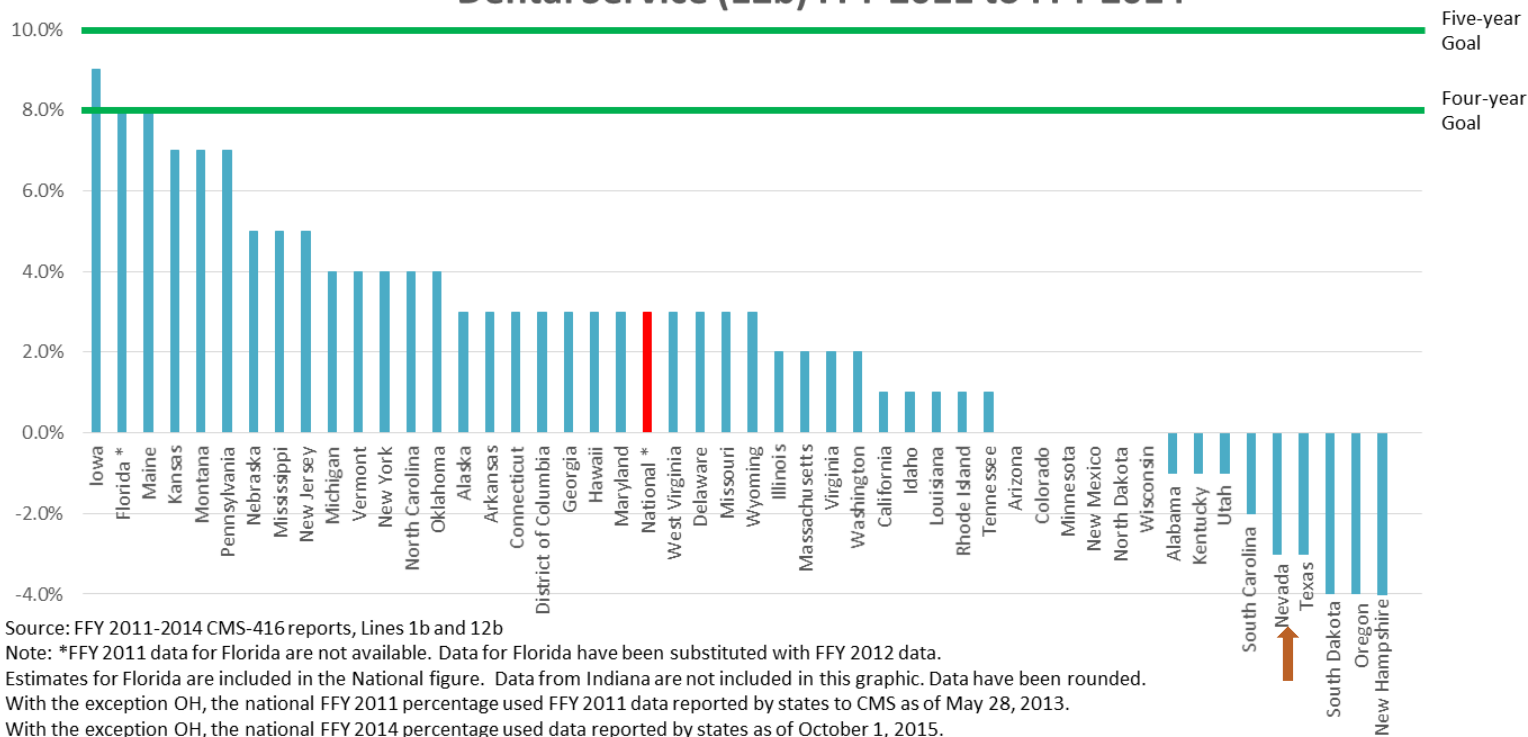
PROGRESS ON PREVENTIVE DENTAL SERVICES GOAL FFY 2011 – FFY 2014 – NEVADA RANKED # 43



Source: <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/downloads/learninglabslides13.pdf>

PERCENTAGE OF CHILDREN, AGE 1-20, WHO RECEIVED ANY PREVENTIVE DENTAL SERVICE FFY 2014 – NEVADA DROPPED > 2 %

Percentage Point Difference in the Proportion of Children, Age 1-20, Enrolled in Medicaid for At Least 90 Days Who Received a Preventive Dental Service (12b) FFY 2011 to FFY 2014



Source: <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/downloads/learninglabslides13.pdf>

Note: Report for FFY 2015 data not available at the time of this presentation

CMS 416 REPORT NEVADA MEDICAID

YEAR TO YEAR COMPARISON

NEVADA MEDICAID		FFY05	FFY 06	FFY 07	FFY 08	FFY09	FFY10	FFY11	FFY12	FFY13	FFY14
1. Total Individuals Eligible for EPSDT	CN	155,178	155,354	154,025	163,426	192,778	228,169	247,282	258,261	267,064	311,955
12a. Total Eligibles Receiving Any Dental Services	CN	26,567	60,647	36,803	48,278	71,129	79,197	92,782	93,765	104,574	109,914
	MN										
	Total	26,567	60,647	36,803	48,278	71,129	79,197	92,782	93,765	104,574	109,914
12b. Total Eligibles Receiving Preventive Dental Services	CN	19,620	24,427	30,803	40,769	60,469	69,784	83,564	85,244	102,687	101,015
	MN										
	Total	19,620	24,427	30,803	40,769	60,469	69,784	83,564	85,244	102,687	101,015
Percentage of Recipients Receiving Preventive Services *** (not part of 416 Report)		12.41%	15.72%	19.99%	24.94%	31.37%	30.58%	33.79%	33.00%	38.45%	32.38%
12c. Total Eligibles Receiving Dental Treatment Services	CN	8,073	9,998	14,085	18,688	38,010	45,068	51,032	48,392	51,125	53,282
	MN										
	Total	8,073	9,998	14,085	18,688	38,010	45,068	51,032	48,392	51,125	53,282
12d. Total Eligibles Receiving a Sealant on a Permanent Molar Tooth	CN						16,350	19,362	18,688	21,037	23,708
	MN						0				
	Total						16,350	19,362	18,688	21,037	23,708
Percentage of Recipients Receiving Sealants 6-9 y/o *** (not Part of 416 report)							36.79%	37.71%	34.41%	36.38%	34.84%
12e. Total Eligibles Receiving Dental Diagnostic Services	CN						74,060	86,868	87,517	97,121	106,123
	MN						0				
	Total						74,060	86,868	87,517	97,121	106,123
12f. Total Eligibles Receiving Oral Health Services provided by a Non Dentist Provider	CN						11,301	8,763	9,487	9,988	8,566
	MN						0				
	Total						11,301	8,763	9,487	9,988	8,566
12g. Total Eligibles Receiving Any Dental or Oral Health Service	CN						86,382	97,951	103,252	111,046	113,790
	MN						0				
	Total						86,382	97,951	103,252	111,046	113,790

NEVADA MEDICAID CHILDREN'S DENTAL UTILIZATION AND COST DATA FEE FOR SERVICE AND MCOs

State Fiscal Year 2014	Fee For Service		Amerigroup		HPN		Total	
	Service Count	Costs	Service Count	Costs	Service Count	Costs	Service Count	Costs
D0100 thru D0999 Diagnostic	121642	\$2,638,841	151756	\$1,735,462	195885	\$3,136,698	469,283	\$7,511,001
D1000 thru D1999 Preventive	100608	\$3,631,351	114098	\$2,443,709	153108	\$3,702,421	367,814	\$9,777,481
D2000 thru D2999 Restorative	47866	\$3,662,980	50848	\$2,304,504	67720	\$4,819,920	166,434	\$10,787,405
D3000 thru D3999 Endodontics	85454	\$3,349,680	9709	\$363,484	9058	\$887,791	104,221	\$4,600,955
D4000 thru D4999 Periodontics	4835	\$416,786	1497	\$55,654	137	\$15,232	6,469	\$487,672
D5000 thru D5899 Prosthodontics Removable	53	\$12,786	30	\$3,857	20	\$6,361	103	\$23,004
D5900 thru D5999 Maxillofacial Prosthetics	0	\$0	0	\$0	0	\$0	0	\$0
D6000 thru D6199 Implant Services	0	\$0	0	\$0	0	\$0	0	\$0
D6200 thru D6999 Prosthodontics fixed	0	\$0	7	\$0	0	\$0	7	\$0
D7000 thru D7999 Oral and Maxillofacial Surgery	11086	\$865,717	11457	\$479,805	11486	\$604,963	34,029	\$1,950,485
D8000 thru D8999 Orthodontics	12608	\$12,963,784	76	\$0	0	\$0	12,684	\$12,963,784
D9000 thru D9999 Adjunctive General Services	20411	\$694,590	19256	\$353,131	16106	\$415,900	55,773	\$1,463,620
TOTALS	404563	\$28,236,515	358734	\$7,739,606	453520	\$13,589,286	1,216,817	\$49,565,407
State Fiscal Year 2015	Fee for Service		Amerigroup		HPN		Total	
Dental Procedure Code	Service Count	Costs	Service Count	Costs	Service Count	Costs	Service Count	Costs
D0100 thru D0999 Diagnostic	123657	\$2,685,237	140016	\$2,037,860	245138	\$3,946,534	508,811	\$8,669,631
D1000 thru D1999 Preventive	102521	\$3,777,678	130147	\$3,068,125	191400	\$4,700,156	424,068	\$11,545,958
D2000 thru D2999 Restorative	46344	\$3,720,777	56139	\$2,807,303	85369	\$6,117,547	187,852	\$12,645,627
D3000 thru D3999 Endodontics	10288	\$606,983	10066	\$399,426	10721	\$1,117,959	31,075	\$2,124,368
D4000 thru D4999 Periodontics	5001	\$427,016	2880	\$116,097	218	\$17,792	8,099	\$560,904
D5000 thru D5899 Prosthodontics Removable	43	\$13,995	16	\$2,317	25	\$6,087	84	\$22,399
D5900 thru D5999 Maxillofacial Prosthetics	0	\$0	0	\$0	0	\$0	0	\$0
D6000 thru D6199 Implant Services	0	\$0	0	\$0	0	\$0	0	\$0
D6200 thru D6999 Prosthodontics fixed	0	\$0	4	\$0	0	\$0	4	\$0
D7000 thru D7999 Oral and Maxillofacial Surgery	12409	\$991,974	13682	\$629,680	14463	\$758,402	40,554	\$2,380,056
D8000 thru D8999 Orthodontics	18737	\$19,940,879	40	\$0	0	\$0	18,777	\$19,940,879
D9000 thru D9999 Adjunctive General Services	18972	\$629,021	23992	\$527,557	22921	\$611,131	65,885	\$1,767,708
TOTALS:	337972	\$32,793,560	376982	\$9,588,364	570255	\$17,275,607	1,285,209	\$59,657,531
Source: DHCFP Dental Dashboards SFY 2014/15								

NEVADA CHECK-UP CHILDREN'S DENTAL UTILIZATION AND COST DATA

Nevada Check-Up								
State Fiscal Year 2014								
Dental Procedure Code	Fee For Service		Amerigroup		HPN		Total	
	Service Count	Costs	Service Count	Costs	Service Count	Costs	Service Count	Costs
D0100 thru D0999 Diagnostic	9978	\$221,440	26943	\$311,922	45579	\$732,776	82,500	\$1,266,137
D1000 thru D1999 Preventive	9842	\$304,326	21281	\$452,103	37002	\$893,324	68,125	\$1,649,754
D2000 thru D2999 Restorative	3109	\$224,942	7414	\$329,329	11782	\$808,559	22,305	\$1,362,829
D3000 thru D3999 Endodontics	1120	\$41,790	981	\$35,955	1044	\$110,913	3,145	\$188,658
D4000 thru D4999 Periodontics	215	\$19,199	252	\$9,547	28	\$2,313	495	\$31,059
D5000 thru D5899 Prosthodontics Removable	0	\$0	1	\$101	3	\$769	4	\$869
D5900 thru D5999 Maxillofacial Prosthetics	0	\$0	0	\$0	0	\$0	0	\$0
D6000 thru D6199 Implant Services	0	\$0	0	\$0	0	\$0	0	\$0
D6200 thru D6999 Prosthodontics fixed	0	\$0	0	\$0	0	\$0	0	\$0
D7000 thru D7999 Oral and Maxillofacial Surgery	845	\$68,060	1975	\$95,938	2372	\$135,281	5,192	\$299,279
D8000 thru D8999 Orthodontics	2518	\$2,615,923	26	\$0	0	\$0	2,544	\$2,615,923
D9000 thru D9999 Adjunctive General Services	2343	\$59,344	3029	\$54,846	3325	\$82,175	8,697	\$196,365
TOTALS	29970	\$3,555,024	61902	\$1,289,740	101135	\$2,766,109	193,007	\$7,610,873
State Fiscal Year 2015								
Dental Procedure Code	Fee for Service		Amerigroup		HPN		Total	
	Service Count	Costs	Service Count	Costs	Service Count	Costs	Service Count	Costs
D0100 thru D0999 Diagnostic	8172	\$186,558	18710	\$275,527	41062	\$668,186	67,944	\$1,130,271
D1000 thru D1999 Preventive	9238	\$302,801	18288	\$432,395	34381	\$851,091	61,907	\$1,586,288
D2000 thru D2999 Restorative	2782	\$206,962	6641	\$336,012	11437	\$771,184	20,860	\$1,314,159
D3000 thru D3999 Endodontics	658	\$30,994	897	\$35,076	946	\$100,960	2,501	\$167,030
D4000 thru D4999 Periodontics	146	\$12,880	366	\$15,833	23	\$1,346	535	\$30,059
D5000 thru D5899 Prosthodontics Removable	0	\$0	0	\$0	2	\$1,230	2	\$1,230
D5900 thru D5999 Maxillofacial Prosthetics	0	\$0	0	\$0	0	\$0	0	\$0
D6000 thru D6199 Implant Services	0	\$0	0	\$0	0	\$0	0	\$0
D6200 thru D6999 Prosthodontics fixed	0	\$0	1	\$0	0	\$0	1	\$0
D7000 thru D7999 Oral and Maxillofacial Surgery	882	\$72,925	1893	\$96,290	2226	\$119,222	5,001	\$288,437
D8000 thru D8999 Orthodontics	3127	\$3,090,844	7	\$0	0	\$0	3,134	\$3,090,844
D9000 thru D9999 Adjunctive General Services	1779	\$48,387	3136	\$67,147	3467	\$85,889	8,382	\$201,423
TOTALS:	26784	\$3,952,351	49939	\$1,258,280	93544	\$2,599,109	170,267	\$7,809,741
Source: DHC FP Dental Dashboards SFY 2014/15								

NEVADA MEDICAID UTILIZATION DATA – CHILDREN’S DENTAL

Population		2014	2015	% Change
	FFS	73,950	71,020	-4.13
	MCO	199,799	209,348	4.56
	Check-up	23,572	21,128	-11.57
Total		297,321	301,496	1.38
Dental Patients				
	FFS	63,201	70,979	10.96
	MCO	156,884	187,197	16.19
Total		220,085	258,176	14.75
Service Count				
	FSS	404,563	337,972	-19.70
	MCO	812,254	947,237	14.25
	Check-up	193,007	170,267	-13.36
Total		1,409,824	1,455,476	3.14
Total Costs				
	FFS	\$28,236,515	\$32,793,560	13.90
	MCO	\$21,328,892	\$26,863,971	20.60
	Check-up	\$7,610,873	\$7,809,741	2.55
Total		\$57,176,280	\$67,467,272	15.25

2014 – 220,085 Child Dental Patients – 74.02% Population Utilization
Average 6.4 Procedures per patient - \$259.79 per patient per year.

2015 – 258,176 Child Dental Patients – 85.63% Population Utilization
Average 5.6 Procedures per patient - \$261.32 per patient per year.

BACKGROUND: ADULT DENTAL

- Low income adults are 40 percent less likely to have a dental visit in the past year, in comparison to adults with dental coverage.
 - 42% of low income adults ages 20 to 64 have untreated tooth decay
 - More than one-third of those 65 and older have lost all their teeth.
 - Adults who are disabled, homebound or institutionalized are at greater risk of dental disease.
- Source: Center for Health Care Strategies, “Engaging Stakeholders to Improve Dental Coverage and Access for Medicaid-Enrolled Adults”. December 14, 2015. www.chcs.org

BACKGROUND CONTINUED: CHALLENGES TO ORAL HEALTH CARE ACCESS AND UTILIZATION

- **Limited Medicaid Dental Coverage:**
 - Mandatory Coverage for Children/ Optional for Adults.
 - Dental Coverage varies from state to state
 - No coverage to Extensive Coverage
- **Insufficient Provider Availability – 20 percent of Dentist nationwide accept Medicaid.**
 - Administrative Requirements
 - Missed appointments
 - Lengthy payment wait times
 - Low reimbursement rates
- **Individual Barriers:**
 - Work or child care arrangements
 - Transportation
 - Cost of co-payments
 - Lack of awareness of dental benefits
 - Oral health secondary to general health
 - Primary care providers may not encourage oral health care

WHAT NEVADA MEDICAID CURRENTLY COVERS FOR ADULT DENTAL – UTILIZATION AND COST DATA

State Fiscal Year 2014	Fee For Service		Amerigroup		HPN		Total	
Dental Procedure Code	Service Count	Costs	Service Count	Costs	Service Count	Costs	Service Count	Costs
D0100 thru D0999 Diagnostic	60627	\$1,339,772	22362	\$320,375	16361	\$271,311	99,350	\$1,931,459
D1000 thru D1999 Preventive	156	\$1,030	206	\$1,838	23	\$596	385	\$3,464
D2000 thru D2999 Restorative	1555	\$153,506	1390	\$36,746	158	\$18,900	3,103	\$209,153
D3000 thru D3999 Endodontics	12016	\$292,194	154	\$267	4	\$1,036	12,174	\$293,497
D4000 thru D4999 Periodontics	4631	\$342,270	2173	\$78,860	61	\$5,002	6,865	\$426,133
D5000 thru D5899 Prosthodontics Removable	18496	\$4,971,447	1714	\$227,379	1408	\$734,299	21,618	\$5,933,125
D5900 thru D5999 Maxillofacial Prosthetics	0	\$0	1	\$0	0	\$0	1	\$0
D6000 thru D6199 Implant Services	0	\$0	9	\$0	0	\$0	9	\$0
D6200 thru D6999 Prosthodontics fixed	4	\$305	5	\$0	1	\$34	10	\$339
D7000 thru D7999 Oral and Maxillofacial Surgery	41539	\$3,612,014	13469	\$682,977	8220	\$546,772	63,228	\$4,841,763
D8000 thru D8999 Orthodontics	28	\$3,254	0	\$0	0	\$0	28	\$3,254
D9000 thru D9999 Adjunctive General Services	11422	\$573,895	3866	\$106,438	1084	\$50,793	16,372	\$731,125
TOTALS	150474	\$11,289,688	45349	\$1,454,880	27320	\$1,628,744	223,143	\$14,373,312
State Fiscal Year 2015	Fee for Service		Amerigroup		HPN		Total	
Dental Procedure Code	Service Count	Costs	Service Count	Costs	Service Count	Costs	Service Count	Costs
D0100 thru D0999 Diagnostic	69252	\$1,559,770	36226	\$609,127	32786	\$530,640	138,264	\$2,699,537
D1000 thru D1999 Preventive	123	\$565	392	\$3,164	44	\$1,105	559	\$4,834
D2000 thru D2999 Restorative	1034	\$136,176	1389	\$34,024	404	\$34,090	2,827	\$204,291
D3000 thru D3999 Endodontics	0	\$0	102	\$234	12	\$1,894	114	\$2,128
D4000 thru D4999 Periodontics	5277	\$384,474	4462	\$167,289	98	\$8,214	9,837	\$559,977
D5000 thru D5899 Prosthodontics Removable	20933	\$5,941,304	2594	\$558,295	5078	\$2,771,383	28,605	\$9,270,982
D5900 thru D5999 Maxillofacial Prosthetics	0	\$0	0	\$0	0	\$0	0	\$0
D6000 thru D6199 Implant Services	0	\$0	3	\$0	0	\$0	3	\$0
D6200 thru D6999 Prosthodontics fixed	0	\$0	11	\$0	3	\$145	14	\$145
D7000 thru D7999 Oral and Maxillofacial Surgery	60636	\$5,424,501	26695	\$1,465,730	23569	\$1,521,679	110,900	\$8,411,909
D8000 thru D8999 Orthodontics	36	\$1,722	0	\$0	0	\$0	36	\$1,722
D9000 thru D9999 Adjunctive General Services	13684	\$735,430	6127	\$202,856	2504	\$118,616	22,315	\$1,056,903
TOTALS:	170975	\$14,183,943	78001	\$3,040,718	64498	\$4,987,767	313,474	\$22,212,428

Source: DHCFP Dental Dashboards SFY 2014/15

NEVADA MEDICAID PREGNANCY COVERAGE AND UTILIZATION:

- Two Dental Codes are Specific for Pregnancy Coverage:
 - D1110 – Dental Prophylaxis Adult
 - D1206 – Topical Fluoride Varnishnote: service limitations - 1 unit per 6 months
Restorative Services are also available for this population.

- Total Preventative Services SFY 2014 – 385 units
- Total Preventative Services SFY 2015 – 559 units
 - D1110 Dental Prophylaxis

- Population:
- SFY 2014 – 5552 recipients (6.93% utilization)
- SFY 2015 – 5396 recipients (10.35% utilization)

NEVADA MEDICAID EMERGENCY ROOM DENTAL UTILIZATION AND COST DATA

Patient Type: Emergency Department			
Discharge Period: Calendar Year 2014			
5259 - Unspecified disorder of the teeth and supporting structures			
Facility	Cases	Tot Charges	Avg Charges
Banner Churchill Community Hospital	101	\$61,445	\$608
Carson Tahoe Regional Medical Center	156	\$96,400	\$618
Carson Valley Medical Center	103	\$117,377	\$1,140
Desert Springs Hospital Medical Center	222	\$327,048	\$1,473
Mesa View Regional Hospital	21	\$14,032	\$668
North Vista Hospital	52	\$38,511	\$741
Northern Nevada Medical Center	302	\$258,449	\$856
Renown Regional Medical Center	540	\$489,981	\$907
Renown South Meadows Medical Center	233	\$252,628	\$1,084
Saint Mary's Regional Medical Center	777	\$751,150	\$967
South Lyon Medical Center	16	\$10,765	\$673
Southern Hills Hospital and Medical Center	28	\$52,104	\$1,861
St. Rose Dominican Hospitals - Rose de Lima Campus	119	\$190,783	\$1,603
University Medical Center of Southern Nevada	630	\$697,960	\$1,108
Valley Hospital Medical Center	155	\$214,763	\$1,386
William Bee Ririe Hospital	48	\$46,281	\$964
Calendar Year 2014	3,503	\$3,619,677	\$1,041
Calendar Year 2013	3,120	\$2,931,091	\$952
Calendar Year 2012	3,220	\$2,633,769	\$881
Calendar Year 2011	3,335	\$2,577,802	\$798
Calendar Year 2010	2,976	\$1,793,553	\$687

Source: <http://www.nevadacomparecare.net/dynamic-facility-diagnosis.php> Accessed 2/17/2016

Nevada Medicaid Utilization Data for Adult Dental

Population (FSS and MCO)	Adults	Pregnancy
SFY 2014	299,938	5,552
SFY 2015	320,220	5,396

Total Dental Patients (Both FSS and HMO): State Fiscal Year:

2014 – 40,559 Adult dental patients – 10.55% population utilization
Average 5.5 procedures per dental patient - \$354.38 per patient per year.

2015 – 67,481 Adult dental patients – 12.66% population utilization
Average 4.6 procedures per dental patient - \$329.17 per patient per year.

Source: DHCFP Dental Dashboards SFY 2014/15 accessed 2/22/16 <http://dhcfp.nv.gov/Pgms/CPT/Dental/>

WHAT OTHER STATES ARE DOING FOR MEDICAID ADULT DENTAL EXPANSION

Dental Benefits Offerings for States' Adult Medicaid Base and Expansion Populations

Dental Benefits Category	Offered to Medicaid Base Population	Offered to Medicaid Expansion Population
No dental benefits	4 states: AL, AZ, DE, TN	3 states: DE, AZ, ND
Emergency-Only	15 states: FL, GA, HI, ME, MS, MO, MT, NV, NH, OK, SC, TX, UT, WV, ID	4 states: HI, NV, NH, WV
Limited	17 states: AR, CO, DC, IL, IN, KS, KY, LA, MD, MI, MN, NE, PA, SD, VT, VA, WY	11 states: AR, CO, DC, IL, IN, KY, MD, MI, MN, PA, VT
Extensive	15 states: AK, CA, CT, IA, MA, NJ, NM, NY, NC, ND, OH, OR, RI, WA, WI	11 states: CA, CT, IA, MA, NJ, NM, NY, OH, OR, RI, WA

Note: Bolded States offer dental benefits to Medicaid expansion population under the Affordable Care Act.

WHAT OTHER STATES ARE DOING FOR MEDICAID ADULT DENTAL EXPANSION

Current Definitions of Medicaid Adult Dental Benefit Categories

Medicaid Dental Benefits	Emergency Only	Relief of pain under defined emergency situations (e.g., uncontrolled bleeding, traumatic injury, etc.).
	Limited	Fewer than 100 diagnostic, preventive, and minor restorative procedures recognized by the American Dental Association (ADA); per-person annual expenditure cap is \$1,000 or less.
	Extensive	A comprehensive mix of services, including more than 100 diagnostic, preventive, and minor and major restorative procedures approved by the ADA; per-person annual expenditure cap is at least \$1,000.

NEVADA MEDICAID - ESTIMATED COST PROPOSAL FOR ADULT DENTAL EXPANSION

- Phase 1 – provide preventive care (examinations, x-rays, cleanings, and oral hygiene). This could reduce the amount of emergency room visits for dental problems, as the potential for dental diseases could be reduced or mitigated.

- Costs: (by Dental Codes):

D0120 – Comprehensive Exam	\$33.24
D0140 – Limited exam/problem focused	\$33.24
D0274 – Dental Bitewings four films	\$23.57
D1110 – Dental Prophylaxis Adult	\$49.81
	Total \$139.86

NEVADA MEDICAID ESTIMATED COST PROPOSAL FOR ADULT DENTAL EXPANSION

- Phase 2 – Providing diagnostic, preventive, endodontic and limited restorative care to reduce the costly adult dental diseases and decay that could be prevented or reduced, creating a cost savings. Utilizing fewer than 100 procedures recognized by the American Dental Association (ADA) with a per-person annual expenditure cap of \$500.00 to \$1,500.

ESTIMATED COSTS - 100% UTILIZATION

CDT CODE	DESCRIPTION	RATE (Current NV)	Adults		Pregnant Women		LIMITATIONS
			Caseload - FFS and MCO		Caseload - FFS and MCO		
			SFY 2014	SFY 2015	SFY 2014	SFY 2015	
			299,938	320,220	5,552	5,396	
D0120	Periodic Oral Evaluation	\$ 33.24	\$ 9,969,955	\$ 10,644,118	\$ 184,559	\$ 179,361	1 per 11mo
D0140	Limited Oral Evaluation Problem Focus	\$ 33.24	\$ 9,969,955	\$ 10,644,118	\$ 184,559	\$ 179,361	1 per 6 mo
D0274	Dental Bitewings four films	\$ 23.57	\$ 7,069,550	\$ 7,547,589	\$ 130,868	\$ 127,182	1 per 6 mo
D1110	Dental Prophylaxis Adult	\$ 49.81	\$ 14,939,936	\$ 15,950,166	\$ 276,561	\$ 268,771	1 per 6 mo
		* \$ 139.86	\$ 41,949,396	\$ 44,785,992	\$ 776,548	\$ 754,675	
	Projection with \$500 cap on services		\$ 149,969,242	\$ 160,110,082	\$ 2,776,160	\$ 2,697,965	
	Projection with \$1000 cap on services		\$ 299,938,485	\$ 320,220,164	\$ 5,552,321	\$ 5,395,931	
	Projection with \$1,500 cap on services		\$ 449,907,727	\$ 480,330,246	\$ 8,328,481	\$ 8,093,896	

* Milliman's calculation of the annual estimated cost was \$139.86.

NOTE:

Procedures are those for preventive services only. They do not include any treatment-related services.

Colorado- estimates a savings of \$1.6 million in emergency dental spending with a projected cost of \$33 million for preventative adult dental for the fiscal year beginning July 2014.

Alaska, California, Hawaii, Indiana, Mississippi, and Utah all impose an annual limit on the cost of adult preventative care for Medicaid. The range is from \$500 to \$2500.

COMMON STRATEGIES FOR ADULT DENTAL EXPANSION

- Increase recognition of the importance of oral health as it related to overall health.
- Prioritizing of spending can be challenging based on budgets and limited resources.
- Need engagement from high-level state policymakers, including legislative leaders, governor's staff, etc.

COMMON STRATEGIES FOR ADULT DENTAL EXPANSION

- Active legislative outreach by dental association, oral health coalitions to increase the profile of the issue.
- Consider incremental phased expansion.
- Leveraging existing contractual relationships, provider networks and care coordination efforts
- Source: Center for Health Care Strategies, “Engaging Stakeholders to Improve Dental Coverage and Access for Medicaid-Enrolled Adults”. December 14, 2015. www.chcs.org

WHAT IS THE FUTURE OF MANAGED CARE?

- These are options that the State may consider:
 - Expanding Managed Care statewide
 - Including additional services that are not currently covered by managed care
 - Expanding the population served by managed care to include aged, blind, or disabled individuals
 - Increasing the number of Managed Care Plans to offer greater choice and flexibility of services

Questions???

Thank You

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