
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 on the States due to
6 multiple policy and systems issues in the State that have 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 health care varies greatly across
10 the State, with rural and neighbor island residents and low-
11 income families experiencing greater access issues. Currently,
12 approximately 180,000 adult medicaid beneficiaries are not
13 getting the benefit of early oral disease detection and
14 treatment for better overall health. Lack of access to dental
15 coverage and oral health care is a health and social justice
16 issue that disproportionately affects poor, minor, elderly, and
17 racial and ethnic minority populations.



1 In 2009, the State terminated all preventative and
2 restorative dental care services for adult medicaid recipients
3 and replaced these services with emergency room services that
4 are limited to pain relief, injuries, trauma, 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, Hawaii medicaid paid \$4,800,000
9 for 1,691 adult emergency room visits for preventable oral
10 health problems, according to the department of health's Hawaii
11 Oral Health: Key Findings report.

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



1 and the islands of Kauai and Hawaii, were more likely than urban
2 residents to go to 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 increased incidence of gum disease; difficulty
7 controlling diabetes; and likelihood of coronary artery disease.
8 These complications can lead to increased disability and death.
9 For diabetic medicaid beneficiaries, increased access to dental
10 care could result in a cost savings between \$118,000 and
11 \$1,700,000 for diabetic medical care for all beneficiaries,
12 according to 2019 estimates by the Healthy Policy Institute of
13 the American Dental Association.

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



1 Poor oral health is clinically proven to have serious
2 adverse impacts 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. Tooth decay is almost completely
6 preventable. However, preventive services, early diagnosis, and
7 interventions that can halt or slow the progression of most oral
8 diseases is currently unavailable to adult medicaid
9 beneficiaries in the State. Problems that could have been
10 addressed early, or even prevented, continue to progress,
11 leading to poor health outcomes and lower quality of life.

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

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



1 disadvantages medicaid recipients, driving poor health outcomes
2 and higher costs.

3 The legislature additionally finds that expanded adult
4 dental benefits can have tremendous positive impacts on state
5 medicaid populations. Individuals with dental benefits are
6 forty-two per cent more likely to have an annual dental checkup
7 than individuals who do not have coverage. Parents who receive
8 dental care are also more likely to take their children to the
9 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 The legislature further finds that expanding dental
2 services benefits for the State's adult medicaid enrollees will
3 reduce the number of acute oral health-related emergency room
4 visits and improve these individuals' chronic disease risks and
5 overall health status. Current estimates are being developed by
6 the department of human services MedQuest division to determine
7 the costs of restoring expanded benefits to adult medicaid
8 recipients in Hawaii.

9 It has been more than a decade since the State removed all
10 but emergency medicaid adult dental benefits. The legislature
11 finds that it is in the best interest of the State and its
12 residents to expand access to care by restoring dental benefits
13 to adult medicaid enrollees.

14 Accordingly, the purpose of this Act is to appropriate
15 funds to restore diagnostic, preventive, and restorative dental
16 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 \$ or so
19 much thereof as may be necessary for fiscal year 2020-2021 to
20 restore diagnostic, preventive, and restorative dental benefits
21 to adult medicaid enrollees; provided that the department of



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

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

5 SECTION 3. This Act shall take effect on December 31,
6 2059.



Report Title:

Adult Dental Benefits; Medicaid; Appropriation

Description:

Appropriates funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees, provided DHS obtains maximum federal matching funds available. Takes effect on December 31, 2059. (HD2)

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