**PEDIATRIC DENTAL BENEFITS UNDER THE AFFORDABLE CARE ACT**

**WHAT ORAL HEALTH ADVOCATES SHOULD KNOW**

The Affordable Care Act (ACA) makes a number of important improvements intended to increase access to dental coverage for children who get health coverage in the individual and small group health insurance markets, including those who will be covered through the new health insurance exchanges. Since the specific benefits in these markets will be determined at the state level, state advocates have an opportunity to help shape children’s dental benefits and ensure that dental plans provide adequate coverage. Pediatric dental benefits are critical for children’s overall health and the ACA includes substantial changes in the way they will be provided for many kids, so the coming months represent an important chance to improve outcomes for children. This brief provides background on the state role in implementing the ACA’s changes to pediatric dental benefits and makes recommendations for how advocates can engage to improve children’s oral health.

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**10 ESSENTIAL HEALTH BENEFITS (EHB)**

1. Ambulatory patient services
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. Mental health and substance use disorder services, including behavioral health treatment
6. Prescription drugs
7. Rehabilitative and habilitative services and devices
8. Laboratory services
9. Preventive and wellness services and chronic disease management
10. Pediatric services, including oral and vision care

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**ACA: BACKGROUND**

- Requires most U.S. citizens/legal residents to have insurance by 2014
- Includes substantial Medicaid expansion
- Creates Health Benefits Exchanges for individuals to purchase coverage
- Requires individual and small employer group health plans to offer Essential Health Benefits which provide a minimum level of coverage
- Institutes insurance market reforms on how insurers offer/administer coverage including oral and vision care

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**Government Programs**

- Medicare
- Medicaid
- CHP+
- Veterans

**Individual or Small Employer Groups**

Health insurers for this market are required to offer Essential Health Benefits (EHB).

- Plans offered inside the exchange must offer all ten EHB (including children’s dental and vision).
- There is no requirement for individuals or small employer groups to purchase dental or vision and the cost for adding these benefits may be a barrier.
- Dental for adults is not considered an EHB but it is for children.

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**Large Employer Groups**

Unchanged by EHB requirements

- Plans offered outside the exchange for individuals or small employer groups must offer all ten EHB (including children’s dental and vision).
- Dental for adults is not considered an EHB but it is for children. In large employer groups adult dental may be offered.

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Colorado will manage a Health Benefit Exchange at the state level.

- Serve children, the elderly and disabled, parents, and childless adults who meet the minimum eligibility level under health reform, now 133% of Federal Poverty Level (FPL). The FPL level in Colorado was 100% before health reform.
- Dental is not required on government programs for adults, but it is for children.
Pediatric oral health benefits are an Essential Health Benefit requirement under the Affordable Care Act. Unfortunately, while the benefit must be offered both inside and outside the Colorado Health Benefit Exchange (Connect for Health Colorado), there is no requirement for individuals to purchase pediatric dental coverage. For many parents it will be a financial burden to take on the additional cost/premium of dental insurance.

**Why is this an important issue to address?**

- We know that when people have dental insurance they are far more likely to visit a dentist.
- It’s important that children have a preventive dental visit by age one. Tooth decay is the most common chronic disease of childhood. Preventive dental care, including annual dental visits, is essential for optimal oral health.
- Regular preventive visits help decrease overall costs of dental care throughout the lifespan.
- Children who grow up with regular dental care are more likely to care for their own children’s oral health, leading to generations of healthier Coloradans.

### Overview of Pediatric Dental Benefits

<table>
<thead>
<tr>
<th><strong>Medicaid or CHP+ eligible?</strong></th>
<th><strong>Have affordable employer-sponsored coverage?</strong></th>
<th><strong>Family income ≤ 400% FPL?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>YES</td>
</tr>
<tr>
<td>Medicaid or CHP+</td>
<td>Medicaid/CHP+ has dental benefits for kids</td>
<td>Qualified health plan with pediatric dental</td>
</tr>
<tr>
<td>No</td>
<td>Qualify health plan with and without pediatric dental</td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>NO</td>
<td>Qualified stand alone dental plan</td>
</tr>
<tr>
<td>Employer-sponsored coverage</td>
<td>Qualified health plan without pediatric dental</td>
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</tbody>
</table>

**Children Age 0 to 18 years**

**WHAT ADVOCATES CAN DO**

- Raise the importance of pediatric dental benefits among decision makers in the state.
- Support mandating dental benefits as part of a “package” for families purchasing health insurance for their children.
- Work to ensure that pediatric dental health services are not an afterthought as Colorado chooses its EHB, develops rules for insurance plans, and makes adjustments to Medicaid and CHP+ in response to the ACA.
- Share information with other health advocates to educate and encourage a unified voice for pediatric dental benefits in Colorado.

**Overview of Pediatric Dental Benefits**

<table>
<thead>
<tr>
<th>Health Insurance Type</th>
<th>Dental Benefits</th>
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<tbody>
<tr>
<td>Medicaid</td>
<td>Early and Periodic Screening, Diagnosis, and Treatment (EPSTD). No cap.</td>
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<tr>
<td>CHP+</td>
<td>State determined benefits consistent with federal CHP+ rules. In Colorado $600/year cap.</td>
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<tr>
<td>Employee-sponsored insurance</td>
<td>Dental benefits often limited to a yearly cap (average is $1500).</td>
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<tr>
<td>Exchange qualified dental plans</td>
<td>Dental benefits determined by the state consistent with federal rules (mirrors CHP+).</td>
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</tbody>
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