

# State of Utah

## Section 1115 Demonstration Amendment

### Dental Services for Medicaid-eligible Adults

#### Section I. Program Description and Objectives

During the 2023 General Session of the Utah State Legislature, Senate Bill 19 “Medicaid Dental Waiver Amendments” was passed and signed into law by Governor Cox. This legislation requires the Utah Department of Health and Human Services (DHHS), Division of Integrated Healthcare (DIH) to seek 1115 Demonstration approval from the Centers for Medicare and Medicaid Services (CMS) to provide dental services to Medicaid-eligible adults ages 21 and older who are not already eligible for dental services.

The state would like to eliminate the dental benefits specific to the blind/disabled, aged, and/or Targeted Adult Medicaid (TAM) groups and create a dental benefit that can be accessed by adults ages 21 and older as defined in Section II. Individuals ages 18, 19, or 20 will receive dental benefits under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) state plan benefit. With this amendment, TAM individuals will no longer need to be enrolled in a Substance Use Disorder (SUD) treatment program in order to receive dental benefits.

#### Goals and Objectives

Oral health is an important component of an individual’s overall health. Untreated caries (cavities) and periodontal (gum) disease can exacerbate certain diseases, such as diabetes and cardiovascular disease, and lead to chronic pain, infections, and loss of teeth.<sup>1</sup> Lack of routine dental care can also delay diagnosis of conditions, which can lead to potentially preventable complications, high-cost emergency department visits, and adverse outcomes.<sup>2</sup> The State believes this demonstration furthers the objectives of Title XIX of the Social Security Act of promoting improved health outcomes by addressing the dental needs of Medicaid eligible individuals.

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<sup>1</sup> U.S. Department of Health and Human Services. *Oral Health in America: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health, 2000.

<sup>2</sup> Freed, M, Neuman, T, Jacobson, *Drilling Down on Dental Coverage and Costs for Medicare Beneficiaries*. March 2019. <https://www.kff.org/medicare/issue-brief/drilling-down-on-dental-coverage-and-costs-for-medicare-beneficiaries/>

The benefits of comprehensive oral care have been underscored in populations with high-severity and chronic substance use disorders. Comprehensive oral care has been shown to improve treatment outcomes in this population.<sup>3</sup> Building upon this evidence, the proposed amendment will expand dental benefits to more Medicaid-eligible adults, including those enrolled in the TAM, without requiring enrollment in a SUD treatment program.

### Operation and Proposed Timeline

The Demonstration will operate statewide. The state intends to implement the proposed benefit within 90 days of approval. The state requests to operate the Demonstration through the end of the current approval period, which is June 30, 2027.

### Demonstration Hypotheses and Evaluation

With the help of an independent evaluator, the state will develop a plan for evaluating the hypothesis indicated below. These hypotheses will be analyzed for the overall demonstration population as well as key subpopulations (e.g., by sex, age, race and ethnicity, primary language, disability status, and geography). The state will identify validated performance measures that adequately assess the impact of the Demonstration on these populations. The state will submit the evaluation plan to CMS for approval.

The state will conduct ongoing monitoring of this demonstration and will provide information regarding monitoring activities in the required quarterly and annual monitoring reports.

The following hypotheses will be tested during the approval period:

Hypothesis	Anticipated Measure(s)	Data Sources	Evaluation Approach
Individuals in the demonstration will have increased utilization of preventative dental care.	-Utilization of preventative dental services.	Claims data	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.

<sup>3</sup> Hanson, G. R., McMillan, S., Mower, K., Bruett, C. T., Duarte, L., Koduri, S., Pinzon, L., Warthen, M., Smith, K., Meeks, H., & Trump, B. (2019). Comprehensive oral care improves treatment outcomes in male and female patients with high-severity and chronic substance use disorders. *Journal of the American Dental Association* (1939), 150(7), 591–601. <https://doi.org/10.1016/j.adaj.2019.02.016>

Individuals in the demonstration will have decreased utilization of emergency dental services.	-Utilization of emergency dental services.	Claims data	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.
The demonstration will lead to improved oral health outcomes among Medicaid-eligible adults.	-Rates of dental caries and periodontal disease.	Claims data	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.
Beneficiaries will report improved satisfaction and access to dental care under the demonstration.	-Beneficiary satisfaction score -Reported access to dental care	Beneficiary survey	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.

## Section II. Demonstration Eligibility

Individuals eligible under this demonstration must be Medicaid eligible individuals age 21 and older in the following eligibility groups:

- Aged, Blind, and Disabled
- Parent/Caretaker Relative Medicaid
- Targeted Adult Medicaid
- Former Foster Care Youth
- Adult Expansion Population
- Spenddown Program (Medically Needy)
- Breast and Cervical Cancer Program
- Nursing Home
- 1915(c) Waiver Programs
- Refugee Medical Assistance
- Presumptive Eligibility
- Transitional Medicaid Assistance

This demonstration does not include:

1. Individuals ages 18, 19, or 20 will receive dental benefits under the EPSDT benefit.

### **Projected Enrollment**

The projected enrollment for individuals in this demonstration population is 243,247.

### **Section III. Demonstration Benefits and Cost Sharing Requirements**

There are no changes to the dental benefits provided to eligible individuals under this amendment. Individuals will continue to receive state plan dental benefits. Cost sharing requirements will not differ from those provided under the state plan.

### **Section IV. Delivery System**

The Department will deliver services through a fee for service payment model, with services provided by the University of Utah School of Dentistry (UUSOD), and their associated statewide provider network.

### **Section V. Implementation and Enrollment in Demonstration**

Eligible individuals will be enrolled in the Demonstration as of the implementation date of this amendment. The state intends to implement the proposed benefit within 90 days of approval.

### **Section VI. Demonstration Financing and Budget Neutrality**

Refer to Budget Neutrality- Attachment 1 for the state's historical and projected expenditures for the requested period of the Demonstration.

Below is the projected enrollment for eligible adults in this demonstration and expenditures for each remaining demonstration year.

	<b>DY22 (SFY 24)</b>	<b>DY 23 (SFY 25)</b>	<b>DY 24 (SFY 26)</b>	<b>DY 25 (SFY 27)</b>
Enrollment	187,955	208,766	213,537	223,279
Expenditures	\$72,603,302	\$80,642,218	\$82,484,960	\$86,248,288

## Section VII. Proposed Waiver and Expenditure Authority

The State requests the following proposed waivers and expenditure authority to operate the Demonstration.

Waiver and Expenditure Authority	Reason and Use of Waiver
Section 1902(a)(10)(B)- Amount, Duration, and Scope of Services and Comparability	To enable the State to vary the amount, duration, and scope of services provided to individuals in the demonstration group.
Section 1902(a)(23)(A) Freedom of Choice	To enable the state to restrict freedom of choice of providers for individuals under this demonstration.

## Expenditure Authority

The state requests expenditure authority to provide dental benefits to all Medicaid eligible adults, age 21 and older who are not pregnant. This includes:

- Aged, Blind, and Disabled
- Parent/Caretaker Relative Medicaid
- Targeted Adult Medicaid
- Former Foster Care Youth
- Adult Expansion Population
- Spenddown Program (Medically Needy)
- Breast and Cervical Cancer Program
- Nursing Home
- 1915(c) Waiver Programs
- Refugee Medical Assistance
- Presumptive Eligibility
- Transitional Medicaid Assistance

EPSDT eligible and pregnant individuals will continue to receive state plan dental benefits.

## Section VIII. Compliance with Public Notice and Tribal Consultation

### Public Notice Process

Public notice of the State's request for this demonstration amendment, and notice of public hearing will be advertised in the newspapers of widest circulation and sent to an electronic mailing list. In addition, the abbreviated public notice will be posted to the State's Medicaid website at <https://medicaid.utah.gov/1115-waiver>.

Two public hearings to take public comment on this request will be held. The first public hearing will be held on June 15, 2023, from 2:00 to 4:00 pm during the Medical Care Advisory Committee (MCAC) meeting. The second public hearing will be held on June 26, 2023, from 4:00 to 5:00 pm. Both public hearings will be held via video and teleconferencing.

### **Public Comment**

The public comment period will be held June 7, 2023, through July 7, 2023.

### **Tribal Consultation**

In accordance with the Utah Medicaid State Plan, and section 1902(a)(73) of the Social Security Act and the DHHS Intergovernmental Policy 01.19 Formal DHHS [Tribal Consultation and Urban Indian Organization Conferment Process Policy](#) , the state ensures that a meaningful consultation process occurs in a timely manner on program decisions or policy impacting Indian Tribes and the Urban Indian Organization (UIO) in the State of Utah. DIH has notified the DHHS Tribal Health Liaison of the waiver amendment. As a result of this notification, DIH will begin to engage in the tribal consultation process by attending the Utah Indian Health Advisory Board (UIHAB) meeting on June 9, 2023 to present this demonstration amendment.

### **Tribal Consultation & Conferment Policy Process**

In the event that a grant, project, policy, waiver renewal or amendment is requested, the Office of AI/AN Health Affairs is contacted. If the request is within the 90 days of submission, the Office's AI/AN Health Liaison will provide an opportunity for presentation to the Utah Indian Health Advisory Board (UIHAB) Tribal and UIO representatives. The Liaison will request an executive summary of the materials to be included in the distribution of the meeting agenda and materials to the UIHAB representatives and Tribal leadership. The information is disseminated to the UIHAB representatives and leadership at least 10 days prior to the meeting for review. During the UIHAB meeting, presenters will address any questions or concerns raised by the representatives. If the UIHAB representatives provide resolutions to or are in agreement with the changes, they will make a motion to pass or support by a majority. If additional Consultation is required, the UIHAB will inform the presenters of that need at that time. If a Tribal or UIO representative would like to have the presentation provided to their leadership, they can also make a formal request at that time. The Office of AI/AN Health Affairs will coordinate with the presenter and the UIHAB representatives or the Tribe or UIO to schedule an additional Consultation or Conferment meeting on the issue(s) or concern(s) raised.

**Section IX. Demonstration Administration**

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