

Dental Coverage for Low-Income Adults in Delaware Begins Oct. 1

NEW CASTLE (Sept. 29, 2020) – Adult Delawareans who receive Medicaid will automatically get dental coverage as part of their plan starting Oct. 1.

Governor John Carney signed legislation establishing the Medicaid adult dental benefit in August 2019. Implementation was originally scheduled for April 2020, but was delayed by the coronavirus pandemic.

Beginning Oct. 1, individuals ages 19-65 who are enrolled in a managed care Medicaid plan will receive their adult dental services through that plan and can obtain a list of providers from their managed care organization. About 200,000 of the 235,000 Medicaid clients (adults and children) in Delaware are served by one of two managed care organizations, Highmark Health Options Blue Cross Blue Shield Delaware and AmeriHealth Caritas Delaware.

Adults who are enrolled in fee-for-service (FFS) Medicaid will receive their adult dental services through that program and may obtain a list of providers from the Department of Health and Social Services' (DHSS) Division of Medicaid and Medical Assistance by contacting the Delaware Health Benefits Manager at 1-800-996-9969.

The benefit will cover a wide variety of services, including exams, cleanings, fillings, sedation, and regular tooth extractions. It will cover \$1,000 of dental care per year; an additional \$1,500 per year may be available for qualifying emergency or supplemental care when medically necessary.

In an emergency order issued Sept. 25, Governor Carney

suspended the \$3 per visit co-pay for adult dental treatments during the COVID-19 public health emergency. Adult Medicaid patients will not be charged the co-pay while the state of emergency remains in effect, and dental providers will not have their payments reduced by \$3 but will be paid the full allowable amount by the Division of Medicaid and Medical Assistance.

Individuals who receive services through the Division of Developmental Disabilities Services (DDDS) may be eligible for additional dental coverage once they exhaust their Medicaid benefit.

Adult dental coverage is optional for state Medicaid programs, but most offer at least an emergency dental benefit. In Delaware, Medicaid and the Children's Health Insurance Program (CHIP) provide no-cost or low-cost health coverage for eligible children.

"We know that low-income adults suffer disproportionately from dental disease, and that poor oral health can increase risks for people with conditions like diabetes and heart disease," said DHSS Secretary Molly Magarik. "This new benefit will go a long way toward improving the overall health of Medicaid recipients in Delaware."

"It has been our longstanding priority to offer preventive and restorative dental treatment for adults, to address negative health outcomes associated with the lack of oral health care," said Steve Groff, Director of DHSS' Division of Medicaid and Medical Assistance. "With this benefit, adults on Medicaid will have access to affordable dental coverage."

One-hundred-twenty-five dentists have signed up to participate in the adult Medicaid program – 87 in New Castle County, 18 in Kent County and 20 in Sussex County.

More information about the Medicaid adult dental benefit is available at the division's website or by calling

1-866-843-7212.

In addition to the start of the dental benefit for adults, October also marks the annual open enrollment period for Medicaid in Delaware, during which individuals can make changes to their managed care plan. Open enrollment runs Oct. 1-31. Call 1-800-996-9969 for more information.