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AHS Medicaid Policy Unit  
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Waterbury, VT 05671-1000

Submitted via e-mail to AHS.MedicaidPolicy@vermont.gov

Thank you for this opportunity to comment on the planned changes to the Medicaid adult dental benefit.

Bi-State Primary Care Association (Bi-State) is a nonpartisan, nonprofit 501(c)(3) charitable organization that promotes access to effective and affordable primary care and preventive services for all, with special emphasis on underserved populations in Vermont and New Hampshire. Bi-State’s Vermont membership includes 11 Federally Qualified Health Centers (FQHCs) delivering primary care at 64 sites and serving almost 182,000 Vermonters. Our members also include Area Health Education Centers, Planned Parenthood of Northern New England, and Vermont’s free clinics. Our members serve 37-percent of Vermont Medicaid enrollees.

Our members work to ensure that all Vermonters have access to primary and preventive care, regardless of ability to pay or insurance status. FQHCs additionally have federal obligations to ensure access to comprehensive health care that includes access to dental care. Our FQHCs provide a range of dental services, including diagnostic, preventive, restorative, prosthetics, endodontics, oral surgery, emergency dental services, and school-based care and education. Vermont FQHCs employ over 110 dental personnel. The Free Clinics also provide dental care, five offer dental services and served 937 patients in 2018.

We know that oral health is connected both directly and indirectly to many medical conditions. Our dental staff screen for oral cancer and the early signs of other diseases, such as hypertension. Poor oral health can exacerbate many chronic conditions, such as rheumatoid arthritis, heart and lung disease, and diabetes. Dental health problems can also affect food intake, leading to a range of problems related to poor diet and nutrition. Dental health problems often result in chronic pain and pain management issues, which in turn can exacerbate mental health issues including substance use disorder. Building a strong system of primary and preventive dental care will lead to significant overall health improvement for Vermonters.

In 2018, Vermont FQHCs treated 36,128 Vermonters for oral health across 88,171 oral health visits (according to UDS data). We believe there are many more patients who would benefit from regular oral care that catches health problems early and treats them effectively. An important first step towards building a culture of early dental intervention is the steps outlined in this
proposed policy, increasing the adult dental Medicaid cap to $1,000, removing two preventive visits from that cap, and removing the copayments from preventive services.

We hear regularly from our members that delivering the best dental care requires, among other things, changing public perception of preventive dental services. Anecdotally, many adults simply ignore oral health until something goes wrong. Turning this attitude around becomes much easier when preventive and early care benefits are fully covered by Medicaid. We are excited to build on this change in payment policy to deliver oral health services well before patients reach the emergency stage. We anticipate this change will additionally facilitate integrating dental and medical care. The literature points to many areas of overlap, and FQHCs, as comprehensive service providers, are ideally positioned to truly integrate these services. A payment policy that rewards early intervention and prevention supports that goal.

We fully support the proposed changes to the Medical adult dental benefit that will go into effect on January 1, 2020. We are happy to work with the state of Vermont on data to track the impact of the change and any efforts designed to promote dental care. We thank DVHA for the opportunity to comment on policy changes, and to keep you informed of the impact on our ability to serve Vermonters.

Sincerely,

Helen Labun, Vermont Public Policy Director, Bi-State Primary Care Association