

A Proposed Amendment to the Delaware Section 1115 Demonstration Waiver

to

The Centers for Medicare & Medicaid Services United States Department of Health and Human Services

State of Delaware

Stephen Groff, Director Division of Medicaid & Medical Assistance (DMMA)

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Section I – Summary

The Delaware Department of Health and Social Services (DHSS), Division of Medicaid and Medical Assistance (DMMA) is requesting an amendment to the Delaware Diamond State Health Plan (DSHP) Section 1115 Demonstration Waiver to add preventative and restorative dental services for adults. This waiver amendment is requested to be effective immediately upon approval.

Recent legislation signed into law by Governor John Carney added dental care for adults as a benefit provided through the State's Medicaid program. This legislation recognizes dental care as an important component of health care. This amendment will enable Delaware to increase access to dental services for adults on Medicaid and ultimately improve individual health outcomes due to improved oral health.

Section II – Program Background, Description, Goals and Objectives

The connection between oral and physical health has been well documented. According to a 2000 report by the United States Surgeon General, linkage exists "between poor oral health and cardiovascular disease, respiratory infection, and adverse pregnancy outcomes such as preterm birth and low birth weight through bacteria and inflammation." Additionally, lack of dental care has financial and social implications.

A Pew Trust study found that "the average cost of a Medicaid enrollee's inpatient hospital treatment for dental problems is nearly 10 times more expensive than the cost of preventive care delivered in a dentist's office". Lack of dental care can also affect employability, an individual's ability to eat/nutrition and sleep as well as impact their social interactions. As part of their three-year Oral Health Project, the Delaware Center for Disability Studies estimates that 49% of adult Delawareans with disabilities have lost teeth due to decay, infection or gum disease. The number one reason that those individuals gave for not seeking dental care was affordability. Individuals who do not have access to regular preventative and restorative dental care often seek treatment in the emergency room. While Delaware-specific data is unknown at this time, a study by the American Dental Association found that between the years of 2013–2016 there were 42,000 emergency room visits, at an average cost of \$446 per visit, for chronic dental conditions.

Per § 440.225 dental services are optional State Plan services under Medicaid. Delaware is one of three states that currently provide no dental services to adults. The State does provide dental services to children through its Early and Periodic Screening, Diagnostic and Treatment program. Dental services for children are carved out of the State's managed care program with claims being paid on a fee-for-service (FFS) basis. Delaware covers the extraction of bony impacted wisdom teeth under its medical benefit.

On August 6, 2019, Delaware Governor John Carney signed into law Senate Substitute 1 for Senate Bill 92, which adds dental care for adults as a benefit provided under the State's Medicaid program. Effective April 1, 2020, Delaware's adult dental benefit will cover both preventative and restorative services. Statutory requirements limit the benefit to \$1,000 per calendar year. An additional \$1,500 per year in benefits is available for emergency services. Dental services for adults will be subject to a \$3 co-pay per visit.

Dental services for adults will be carved into managed care, with services available to individuals during their brief FFS period prior to managed care enrollment. Dental services for children will continue to be carved out of managed care with claims being paid through FFS. The covered services, service limitations, prior authorization requirements and fee schedule for adults align closely with that for children.

DMMA submitted a State Plan Amendment to CMS on January 13, 2020 adding adult dental services as an optional service to its State Plan. Additionally, Delaware submitted an amendment to its Alternate Benefit Plan making adult dental services available to its adult group in the same manner as described in its State Plan.

The addition of adult dental services further supports DMMA's mission to "Improve health outcomes by ensuring that the highest quality medical services are provided to the vulnerable populations of Delaware in the most cost effective manner." DMMA seeks to increase access to dental services for adults on Medicaid ultimately resulting in improved health outcomes because of improved oral health.

Section III – Demonstration Goals and Objectives

Delaware will provide an array of preventative and restorative dental services through primarily a managed care delivery system to adults on Medicaid. The goal of this demonstration is to increase access to dental services ultimately resulting in improved health outcomes for adults on Medicaid. DMMA also seeks to, decrease the percent of untreated dental caries, and increase the number of adults with diabetes who receive an oral exam and preventative services annually.

Delaware seeks to achieve the following during this demonstration period:

- Increase the number of adults who receive an oral exam annually.
- Decrease the percent of untreated dental caries in adults.
- Increase the number of adults with diabetes who receive an oral exam and preventive services (cleaning) annually.

Section IV – Eligibility, Benefits, Delivery System and Cost-Sharing

Eligibility

Medicaid eligibility requirements will not differ from the approved Medicaid State Plan and approved DSHP 1115 demonstration. Delaware is not proposing changes to Medicaid eligibility standards in this amendment.

Benefits

Benefits will not differ from the approved Medicaid State Plan and approved DSHP 1115 demonstration once the concurrent State Plan amendments to add adult dental benefits have been approved by CMS. The State is amending its State Plan as well as its Alternate Benefit Plan to add adult dental services. Delaware will cover an array of preventative and restorative services within the statutorily prescribed \$1,000 annual and \$1,500 annual emergency basis limits.

DMMA defines emergency basis as:

- An unforeseen or sudden occurrence demanding immediate remedy or action, without which a reasonable licensed dental professional would predict a serious health risk or rapid decline in oral health.¹
- When an individual's dental care needs exceed the \$1,000 per year dental benefit limit, and postponement of treatment until the next benefit year would result in tooth loss or exacerbation of an existing medical condition.

Delivery system

No changes to the current managed care and FFS delivery systems are being proposed in this amendment. Dental services for adults will be provided through Delaware's existing mandatory managed care program currently authorized under this demonstration and provided through the two DSHP managed care organizations (MCOs). However, the DSHP MCOs will not bear any risk for dental services for the first year (calendar years 2020-2021) of the adult dental benefit. The MCOs will be reimbursed on a non-risk basis under the rules at 42 CFR 447.362. Dental services will be available through FFS prior to an individual's enrollment in managed care. Dental services for children will continue to be provided through Medicaid FFS and excluded from the DSHP demonstration waiver.

Consistent with standard terms and conditions (STC) #37, Delaware will implement and operationalize the adult dental benefit through managed care in compliance with the 42 CFR 438 managed care requirements.

Cost-sharing

¹ Oral health is defined by the World Health Organization as a state of being free from chronic mouth and facial pain, oral and throat cancer, oral infection and sores, periodontal (gum) disease, tooth decay, tooth loss, and other diseases and disorders that limit an individual's capacity in biting, chewing, smiling, speaking, and psychosocial well-being (https://www.who.int/news-room/fact-sheets/detail/oral-health)

The cost-sharing requirements under this Demonstration will not differ from those provided under the Medicaid State Plan. Adults will pay a \$3 co-pay per dental visit.

Section V – Demonstration Hypothesis and Evaluation

The Demonstration will test if the addition of adult dental benefits increases access to dental services and ultimately improved health outcomes for adults in Delaware.

Delaware will evaluate whether the demonstration:

- Increases the number of adults who receive an oral exam annually.
- Decreases the percent of untreated dental caries in adults.
- Increases the number of adults with diabetes who receive an oral exam and preventive services (cleaning) annually.

Resulting changes expected through the demonstration are:

- More adults who are on Medicaid will receive an oral exam annually.
- Decreases in the percent of adults on Medicaid who have untreated caries.
- More adults with diabetes who are on Medicaid will receive an oral exam and preventative services annually.

Delaware is currently developing its draft Evaluation Design, per Section XVII of the DSHP 1115 Demonstration Waiver STCs. Delaware intends to incorporate the addition of adult dental benefits into the draft and final Evaluation design. Delaware will add a section to the quarterly and annual monitoring reports to address the implementation of the dental benefit.

Section VI – Demonstration Financing and Budget Neutrality

Since the Delaware adult dental benefit will be new starting October 1, 2020, no statespecific adult dental data/experience exists. To estimate the costs associated with the new adult dental benefit, Mercer leveraged CY 2018 adult dental experience from a nearby Northeastern state. Specifically, the CY 2018 adult dental utilization, for the same procedures, was re-priced at the Delaware adult dental fee schedule and the populations were aligned with the Delaware 1115 MEGs. The re-priced CY 2018 per member per months (PMPMs) were then trended from a midpoint of CY 2018 to the midpoint of October 1, 2020 – December 31, 2020 and January 1, 2021 – December 31, 2021 to align with the prospective contract periods and demonstration year. The trends applied are the same as the trends used in the current 1115 budget neutrality agreement. Delaware projects that the WOW and WW costs for adult dental are equivalent as they are based on the expected cost to procure the services. Delaware seeks to amend the existing WOW PMPM budget neutrality limits for affected MEGs to include the adult dental costs defined below:

	PMPM					
Delaware Adult Dental 1115 Population	Comparison State CY 2018 Data (Repriced)		DY 1 10/1/2020 - 12/31/2020		DY 2 1/1/2021 - 12/31/2021	
TANF Adults	\$	29.96	\$	33.19	\$	34.09
SSI Adults	\$	22.72	\$	24.99	\$	25.63
DSHP PLUS State Plan	\$	21.80	\$	23.26	\$	23.66
DSHP PLUS HCBS	\$	22.42	\$	23.92	\$	24.33
Adults (expansion and new adults)	\$	29.09	\$	32.44	\$	33.39
All Delaware Adult Dental 1115 Population	\$	27.04	\$	29.87	\$	30.67

Section VII – List of Proposed Waivers and Expenditure Authorities

No additional Waiver or Expenditure authority is necessary.

Section VIII – Public Notice

DMMA published a notice of public comment on its intent to amend the DSHP and DSHP Plus 1115 waiver related to Adult Dental Benefit in the Delaware News Journal and the Delaware State News on July 10, 2020. The public notice and copies of the draft amendment were posted on the DHSS/DMMA website and hardcopies were made available upon request to DMMA.

Additionally, DMMA held two virtual public meetings in order to receive feedback from the public. These meetings were held on July 16, 2020 at 9:30 am and on July 20, 2020 at 6:30 pm. Thirty-eight individuals registered for the meeting during which DMMA received feedback and answered questions about coverage of specific procedures such as filings and extractions.

DMMA also received feedback from two other individuals via email.

The public feedback was very positive with stakeholders expressing support for the benefit particularly for vulnerable populations such as people with disabilities and older adults. Other feedback themes included the need for a robust provider network and member education and outreach regarding the new benefit.

Section IX – Demonstration Administration

Name and Title: Glyne Williams, Chief of Policy & Planning, DMMA Telephone Number: (302) 255-9628 Email Address: <u>glyne.williams@delaware.gov</u>



STATE OF DELAWARE PUBLIC NOTICE DELAWARE HEALTH AND SOCIAL SERVICES DIVISION OF MEDICAID AND MEDICAL ASSISTANCE

DELAWARE DIAMOND STATE HEALTH PLAN 1115 DEMONSTRATION WAIVER AMENDMENT

Delaware Health and Social Services (DHSS) / Division of Medicaid and Medical Assistance (DMMA) gives notice of its intent to file an application with the Centers for Medicare and Medicaid Services (CMS) to amend Delaware's Section 1115 Diamond State Health Plan (DSHP) Demonstration Waiver to incorporate preventative and restorative dental services for adults into managed care.

<u>Purpose</u>

The purpose of this posting is to provide public notice and receive public input for consideration regarding Delaware's Diamond State Health Plan (DSHP) 1115 Waiver amendment, which will add effective 10/1/2020 Medicaid state plan-covered preventative and restorative dental services for adults in the existing DSHP and DSHP managed care delivery system.

<u>Proposed Amendment: Overview and Summary of Proposed 1115 DSHP Waiver Amendment for Adult Dental</u> <u>Services</u>

The Delaware Department of Health and Social Services (DHSS), Division of Medicaid and Medical Assistance (DMMA) is requesting an amendment to the Delaware Diamond State Health Plan (DSHP) Section 1115 Demonstration Waiver to include state plan covered preventative and restorative dental services for adults in the DSHP and DSHP Plus managed care delivery system.

Recent legislation signed into law by Governor John Carney added dental care for adults as a benefit provided through the State's Medicaid program. This important legislation recognizes dental care as an important component of health care. This 1115 waiver amendment will enable Delaware to increase access to dental services for adults on Medicaid and ultimately improve individual health outcomes due to improved oral health.

DSHP 1115 Waiver Program: Adult Dental Services Amendment Description, Goals and Objectives

On August 6, 2019, Delaware Governor John Carney signed into law Senate Substitute 1 for Senate Bill 92, which adds dental care for adults as a benefit provided under the State's Medicaid program. Effective October 1, 2020, Delaware's adult dental benefit will cover both preventative and restorative services. Statutory requirements

limit the benefit to \$1,000 per calendar year. An additional \$1,500 per year in benefits is available for emergency services. Dental services for adults will be subject to a \$3 co-pay per visit.

DMMA submitted a State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) on January 16, 2020 adding adult dental services as an optional service to its State Plan. This SPA is pending CMS approval. Additionally, Delaware will amend its Alternate Benefit Plan making adult dental services available to its adult group in the same manner as described in its State Plan.

Dental services for adults will be carved into the existing DSHP and DSHP Plus managed care delivery system that operates under Section 1115 waiver authority, with services available to individuals during their brief FFS period prior to managed care enrollment. Dental services for children will continue to be carved out of managed care with claims being paid through FFS. The covered services, service limitations, prior authorization requirements and fee schedule for adults in managed care will align closely with that for children.

The addition of adult dental services further supports DMMA' s mission to "*Improve health outcomes by ensuring that the highest quality medical services are provided to the vulnerable populations of Delaware in the most cost effective manner.*" DMMA seeks to increase access to dental services for adults on Medicaid ultimately resulting in improved health outcomes because of improved oral health.

Delaware seeks to achieve the following during this demonstration period:

- Increase the number of adults who receive an oral exam annually.
- Decrease the percent of untreated dental caries in adults.
- Increase the number of adults with diabetes who receive an oral exam and preventive services (cleaning) annually.

Public Comment Submission Process

DHSS/DMMA is interested in receiving public input regarding this amendment. The public is invited to review and comment on the proposed amendment for adult dental services. Comments must be received by 4:30 p.m. on August 9, 2020 and may be submitted as described below.

Comments on the amendment may be submitted in the following ways:

This public notice and copies of the draft amendment are posted on the DHSS/DMMA website at:

http://dhss.delaware.gov/dhss/dmma/medicaid.html

Comments and input may be submitted in the following ways:

By email: <u>Nicole.M.Cunningham@state.delaware.us</u>

Hardcopies of the public notice may also be obtained by contacting Nicole Cunningham at the email address above.

Public Meetings

DHSS/DMMA will hold two virtual public meetings with opportunity for public comment, as listed below.

July 16, 2020 9:30 AM ET Register in advance for this webinar: https://mmc.zoom.us/webinar/register/WN_JVbauYu3R22x6rjFiysujg

When: July 20, 2020 6:30 PM ET Register in advance for this webinar: https://mmc.zoom.us/webinar/register/WN_MSQDIp5XQTqnZGZS_WsJtQ

Any public feedback received will be considered the DHSS/DMMA and summarized in the 1115 DSHP Waiver Amendment that will be submitted to CMS.

-DocuSigned by:

Stephen Groff

7/6/2020 | 2:00 PM EDT

Date

Stephen M. Groff Director Division of Medicaid and Medical Assistance