## Summary of legislation and cost estimates for an adult dental benefit in NH Medicaid

HB 692: Introduced January 17, 2019

• Signed by the Governor on July 17, 2019 subsequent to an amendment from the Senate to add detail to the legislation

HB 4, sections 224 – 227: 2020-2021 Budget Bill

- Signed by the Governor on September 26, 2019.
- HB 692 rolled into HB 4 with one change from the wording in the final version of HB 692
- Due date for the report to the Governor, President of the Senate, and Speaker of the House is changed from October 1, 2019 to January 1, 2020
- HB4 (formerly HB 692) Adult Dental Benefit Working Group holds organizational meeting on September 26, 2019

SB 754: Introduced February 13, 2020

- Detail is added to HB4, sections 224-227 that included specific tasks and due dates for DHHS to follow
- Vacated from Committee and Laid on Table June 16, 2020

HB 250: Introduced as legislation relative to oral health, amended several times

- Ought to Pass with Amendment in the Senate on June 16, 2020
- House concurred on June 30, 2020
- Vetoed by the Governor July 28, 2020
- Veto sustained September 16, 2020

August 2020 Plan:

• DHHS revised cost estimate based on March 2020 enrollment

SFY 22-23 DHHS Budget Process:

- Included as a "Priority Need" in the Division of Medicaid Services budget
- Total funds for SFY22 \$11,865,840 and SFY23 \$11,865,840

New Hampshire Department of Health and Human Service Medicaid Care Management Program Adult Dental Benefit Cost Estimates - Nationwide Average Medic:				
	With \$1,500 M	ax on Non	-preventiv	
	Medium	High	August 2020 Plan**	
PMPM Claim Cost	\$12.50	\$21.50	\$14.25	
irst Year Pent-Up Demand ncrease Provider Fees to Nationwide Average Medicaid Fees	1.88 3.10	4.30 5.56	2.85 3.69	
Projected Service Cost PMPM	\$17.48	\$31.36	\$20.79	Cost estimates based on December 2019 enrollment
Administrative Cost Allowance	2.31	4.15	2.75	Traditional - 38,237
Profit/Risk Margin Allowance	0.30	0.54	0.36	Expansion - 47,470
Premium Tax (2.0%)	0.41	0.74	0.49	
Projected Total Cost PMPM	\$20.50	\$36.79	\$24.38	
				Cost estimates based on March 2020 enrollment:
Additional Considerations				Traditional - 37,085
Cost of Additional Transportation Services	2.60	2.60	2.60	Expansion - 51,143
Medical Cost Offsets (e.g., due to reduced emergency department costs)	(0.76)	(0.76)	(0.76)	
Net Projected Cost PMPM	\$22.34	\$38.63	\$26.23	
State Cost (millions)				
Fraditional (50%)	\$5.13	\$8.86	\$5.84	
Expansion (10%)	1.27	2.20	1.61	
Fotal State Cost	\$6.40	\$11.06	\$7.45	
Federal Cost (millions)	,	,		
Fraditional (50% FMAP)	\$5.13	\$8.86	\$5.84	
Expansion (90% FMAP)	11.45	19.81	14.49	
Fotal Federal Cost	\$16.58	\$28.67	\$20.32	

Medium level: Excludes removable prosthetics and endodontics

High level: Includes removable prosthetics and endodontics

August 2020 Plan: Excludes endodontics, periodontics except for preventive/maintenance (scaling & root planing), crowns, orthodontics

HB 692: No Fiscal Note included due to lack of plan development and scope of services to be included

HB 4: Included an appropriation for FY 20/21 of \$500,000 (\$250,000 general funds/\$250,000 federal funds)

SB 754 and HB 250: Fiscal Note included Medium and High columns

August 2020 Plan: Cost estimate using March 2020 enrollment with modification from the Medium level benefit