HB 4 (formerly HB 692) Working Group on the Plan Preparation of an Adult Dental Benefit Into a Value-Based Care Platform In New Hampshire Medicaid

April 22, 2022

Activities since the December 17, 2021 report submission:

Adult dental benefit legislation has been acted upon in both the Senate (SB 422) and House (HB 103) since the last report to this committee.

SB 422

Medicaid Director Henry Lipman and Medicaid Dental Director Dr. Sarah Finne testified in support of the bill before the Health and Human Services Committee on February 2, 2022.
The bill was amended twice to include the following items:

- Appropriation of funds provided through the use of the Centene Corporation Settlement
- Yearly maximum benefit of $1500, excluding preventive services

The bill was passed by the full Senate after the first amendment by a vote of 24 – 0 and after the second amendment by a vote of 23 – 0.

HB 103

Subsequent to passage of this bill in the full House by a vote of 225 -127, Medicaid Director Henry Lipman and Medicaid Dental Director Dr. Sarah Finne testified in support of the bill before the House Finance Division III Committee several times in February and March, 2022. The Finance committee had a number of questions related to the actuarial estimate for the cost of the adult dental benefit and with the assistance of the department's contracted actuaries, the committee was provided with a detailed review of the actuarial process.
The bill was amended to include the following items:

- Annual updates of Current Dental Terminology (CDT) Codes to be posted on the department website
- Yearly maximum benefit of $1500, excluding preventive services, subject to adjustment upon approval of the joint legislative fiscal committee and Governor and Council
- Appropriation of funds provided through the use of the Centene Corporation Settlement
- Repeal of the Adult Dental Benefit Working Group legislation (HB4, Laws of 2019)
- Reenactment of the Adult Dental Benefit Working Group with the same required members
- Discontinuation of the working group when the selected approach for administering the benefit has been chosen

The amended bill passed the full House Finance Committee by a vote of 14 - 5.
The bill was then passed by the full House on March 8, 2022 by a vote of 237 – 100.

Crossover

HB 103 was amended and passed by the Senate Health and Human Services Committee to exclude preventive and diagnostic services from the cost sharing for individuals over 100% Federal Poverty Level (FPL) and to define the portion of the Centene Corporation Settlement that would cover the financial requirement to complete the Medicaid Care Management SFY 20 Risk Corridor calculation ($2.4M). The remainder of the settlement funds would be used to fund the state portion of the proposed adult dental benefit.

SB 422 was amended by the House Finance Division III Committee to provide removable prosthodontics to the individuals included in the Acquired Brain Disorder (ABD), Developmental Disability (DD), Choices for Independence (CFI) waivers, and nursing facility residents.
These amendments have fully aligned SB 422 and HB 103.
The Department will continue to monitor the progress of these two bills as they proceed to the full Senate and House.

Department preparedness to implement an adult dental benefit on April 1, 2023
The Division of Medicaid Services has developed a timeline to meet critical deadlines during the contracting and implementation process. Dates may vary depending on the actual effective date of the legislation.

- May, 2022 – Release of Request for Information (RFI)
- July, 2022 – Release of Request for Proposals (RFP)
- September, 2022 – Governor and Council approval of contract(s)
- September, 2022 to January, 2023 – Rules development and approval
- April –June, 2023 - Submission of a state plan amendment (SPA) and waiver(s) to the Centers for Medicaid and Medicare Services (CMS) within the quarter of the implementation date
- April 1, 2023 - Implementation