



The Pediatric Dental Essential Health Benefit in Covered California

Q What is the pediatric dental essential health benefit (EHB)?

A Under the Affordable Care Act (ACA), health insurers participating in the health insurance marketplace through Covered California must cover and provide 10 essential health benefits. One of these benefits is for pediatric services, including dental and vision care. As an EHB, pediatric dental coverage must be offered without annual or lifetime limits.¹ By including pediatric dental care as one of the essential health benefits, policymakers acknowledged and recognized the significance of oral health, especially with regard to preventive services that are a hallmark of the ACA's provisions.

Additionally, oral health screening is one of the 26 covered preventive services for children² meaning that these services must be covered without a family having to pay a copayment or co-insurance to meet a deductible. This applies only when these services are delivered by a network provider.

Q Why is pediatric dental care important?

A The sooner children begin getting regular dental checkups, the healthier their mouths will stay throughout their lives. Early checkups help prevent cavities, which can lead to pain, trouble concentrating and other medical issues. Youngsters with healthy teeth chew food easily, learn to speak clearly and smile with confidence. The American Dental Association and the American Academy of Pediatrics recommend that every child should visit a dentist by age 1 – or as soon as the first tooth appears. This “well baby visit” teaches parents and caregivers how to care for their children’s teeth and helps them remain cavity-free.

Q Why should pediatricians encourage families to enroll their children in a dental plan?

A Childhood caries is the most common chronic condition in children and the greatest unmet need. A disproportionate amount of family out-of-pocket health expenses are for dental expenses, and prevention has been shown to be much more cost-effective than restorative services. Poor oral health leads to worsening of systemic health conditions. It is a best practice for children to have their first dental visit by age one year; this is best provided in a ‘dental home,’ which provides the periodic exam to encourage oral health and, when necessary, the appropriate level of restorative services. Having insurance to provide this care will take away the financial barrier that often is a stumbling block in seeking dental services, or worse, delaying care to the point it becomes a medical emergency.

Q What kinds of oral health services will be provided through the dental EHB?

A California elected to provide the scope of dental benefits offered under the Healthy Families program, including medically necessary orthodontia. These include diagnostic and preventive benefits such as oral examinations, x-rays, topical fluoride, and dental sealants and restorative services such as fillings. A comprehensive list of the dental benefits can be found at:

http://regs.cqstatetrack.com/info/get_downloaded_text?action_id=250150&text_id=104017&xtype=full_text

Q How will the pediatric dental EHB be offered in Covered California?

A In plan year 2014, a child enrollee or family with a dependent under age 19 will first choose a qualified health plan for their medical coverage and then have the option to choose a stand-alone dental plan to receive pediatric dental coverage.

Q Are parents required to purchase the dental EHB for their children?

A No, for plan year 2014, parents are not required to purchase the dental EHB, though it could be strongly encouraged by pediatricians and family practitioners, enrollment counselors and other entities who guide parents through the enrollment process.

Q If pediatric dental is deemed an “essential health benefit,” why isn’t this a mandatory purchase?

A Partially due to cost-related factors, Covered California elected to make purchase of the pediatric dental EHB voluntary.³ A stand-alone dental plan is:

1) Subject to a separate out-of-pocket maximum of \$1,000 for one child (or \$2,000 maximum for a family with more than one child)⁴ that is not coordinated with the medical plan out-of-pocket maximum; and

2) Not eligible for the advance premium tax credit (APTC) for which child enrollees and families might qualify.

Recent legislation will ensure coordination of the medical and stand-alone dental plan out-of-pocket maximum, but will not go into effect until 2015. Advocacy at the federal level is in progress to ensure that the APTC applies to the pediatric dental coverage regardless of whether it is offered through a stand-alone dental plan or via an “embedded” medical and dental plan.

Q How do child enrollees and/or parents with children sign up to receive this benefit?

A Selecting the pediatric dental essential health benefit is part of the enrollment process when a child enrollee/parents signs up for medical coverage. Since purchase of the pediatric dental essential health benefit is not mandatory for plan year 2014, a child enrollee/parent will first need to choose a qualified health plan for their medical coverage and then select a dental plan for the pediatric dental benefit.

Q Which dental plans are providing the pediatric dental EHB?

A Five insurance companies will offer plans to families who buy insurance through Covered California in 2014: Anthem Blue Cross, Blue Shield of California, Delta Dental, Liberty Dental and Premier Access.

Q How much will this benefit cost?

A Depending on the type of coverage selected and the beneficiaries’ county of residence, stand-alone dental plan premiums range from less than \$10 a month for an HMO plan in some areas to about \$30 a month for a Dental Preferred Provider Organization (DPPPO). For a comprehensive review of the coverage types by county, visit https://www.coveredca.com/news/PDFs/CC_Childrens_dental_plan_rates.pdf

Q What else should I know about how this benefit is being offered in Covered California?

A The way this benefit is being offered for 2014 will change for 2015. If you are interested in tracking these changes and/or weighing in, visit this link to the Covered California board meeting schedule and materials, <http://www.healthexchange.ca.gov/BoardMeetings/Pages/Default.aspx>

Q If the parent(s) of my child patients still do not understand this benefit, who can they contact for more information?

A Below are a couple of resources you can refer parents to for more information:

On the Internet

<https://www.coveredca.com/enrollment-assistance/index.html>

Via Phone

Covered California Customer Service Phone: **1-800-300-1506** (TTY: 1-888-889-4500)

Additional Resources:

Children's Dental Health Project, "FAQ: Pediatric Oral Health Services in the Affordable Care Act (ACA)," July 2013, accessed October 7, 2013 at <http://www.cdhp.org/system/files/FAQ%20-%20Pediatric%20Oral%20Health%20Services%20in%20ACA%20%28Aug%2021%202013%29.pdf>

Covered California, "Children's Dental Plan Insurance Rates 2014," June 25, 2013, updated September 6, 2013, accessed October 7, 2013 at https://www.coveredca.com/news/PDFs/CC_Childrens_dental_plan_rates.pdf.

1. 24 45 CFR §155.1065(2)(a) referencing 45 CFR §147.126.
2. HHS.gov/HealthCare, U.S. Department of Health & Human Services, "Preventive Services Covered Under the Affordable Care Act," <http://www.hhs.gov/healthcare/facts/factsheets/2010/07/preventive-services-list.html#CoveredPreventiveServicesforChildren>.
3. "Pediatric Dental Coverage: Background and Policy Options," Board Recommendation Brief distributed by Covered California, <http://www.healthexchange.ca.gov/BoardMeetings/Documents/August%208,%202013/BRB%20-%20Pediatric%20Dental%20Coverage%20-%20Background%20and%20Policy%20Options.pdf>, accessed December 2, 2013.
4. When more than one child is covered by a pediatric dental plan or policy, the policy/plan deductibles and out-of-pocket maximum amounts are equal to two times the individual values; however, each individual child is responsible only for the single deductible and out-of-pocket maximum in a plan year.

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