

Correlation between Medicaid Funding and positive outcomes

Three reviews of State Medicaid dental programs investigated the impact of increasing Medicaid funding and the impact that had on access to dental services among Medicaid enrollees and Medicaid eligible individuals.

- The Connecticut Health Foundation's *Impact of Increased Dental Reimbursement Rates on HUSKY A –Insured Children: 2006-2011* [1] found higher reimbursement rates and improved administrative structure encouraged many more private practice dentists to treat children insured under HUSKY A. In addition, increased private dentist participation in the Medicaid program directly contributed to greater access to oral health services among low-income children.
 - The number of children enrolled in the Medicaid program at least one day (ever enrolled) grew 18.1 percent between 2006 and 2011. Thirty-six and 59 percent of these children had at least one visit per year in 2006 and 2011, respectively.
 - The number of children continuously enrolled in Medicaid grew nearly 37 percent between 2006 and 2011.
 - In 2006, 46 percent of continuously enrolled children had at least one visit per year, compared with 69.5 percent in 2011.
- The Missouri Foundation for Health's *Strategies to Enhance Dentists' Participation in Medicaid* [2] found in the six states examined (Alabama, Michigan, South Carolina, Tennessee, Virginia, and Washington) "provider participation increased by at least one-third, and sometimes more than doubled, following rate increases. Not only did the number of enrolled providers rise, but so did the number of patients treated. Patients access to care, as measured by the number of enrollees using dental services, also increased after rates rose."

Moreover, the Foundation found "rates need to at least cover the cost of providing service, which is estimated to be 60 to 65 percent of dentists' charges."

 Reynolds et al. conducted a member and dentist qualitative content analysis regarding a dental program for the Medicaid expansion population and identified themes present in open-ended responses from 2 surveys – one sent to a random sample of Medicaid members and one sent to dentists in private practices. [3] Common themes identified in Medicaid member narratives were related to "oral health needs and status, availability of dentists who accept Medicaid, and Medicaid coverage for dental care."

Common themes identified from responses of dentists in private practice were related to the administrative burden of participating with the Medicaid program, with coverage of services and reimbursement "cited as well." Consistent between both members and dentists was "patient confusion or lack of knowledge about programme enrollment and coverage."

Results emphasize the importance of treating the oral health needs of Medicaid members for the conditions present, ensuring access to dental providers that accept Medicaid, reducing administrative burden for providers and practices to participate with Medicaid, evaluating Medicaid reimbursement rates for dental services, and providing information about the Medicaid dental benefit to Medicaid members in a way that supports members' understanding of their benefit.

[1] Beazoglou, T., Douglass, J., Bailit, H., and Myne-Joslin, V. <u>Impact of Increased Dental Reimbursement Rates</u> <u>on HUSKY A –Insured Children: 2006-2011</u> Connecticut Health Foundation. February, 2013.

[2] Frosh, Wendy J. <u>Strategies to Enhance Dentists' Participation in Medicaid</u>. Missouri Foundation for Health. Spring 2017.

[3] Reynolds JC et al. 2019. Member and dentist narratives about a dental programme for the Medicaid expansion population: A content analysis. Community Dentistry and Oral Epidemiology. DOI: <u>10.1111/cdoe.12490</u>