Senate

General Assembly

File No. 88

January Session, 2025

Senate Bill No. 1299

Senate, March 13, 2025

The Committee on Human Services reported through SEN. LESSER of the 9th Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.

AN ACT CONCERNING MEDICAID-COVERED DENTAL CARE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Section 17b-282c of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2025*):

(a) All nonemergency dental services provided under the Department of Social Services' dental programs, as described in section 17b-282b, shall be subject to prior authorization. Nonemergency services that are exempt from the prior authorization process shall include diagnostic, prevention, basic restoration procedures and nonsurgical extractions that are consistent with standard and reasonable dental practices. Payment for nonemergency dental services shall not exceed one thousand dollars per calendar year for an individual adult, provided <u>prevention services such as oral exams and dental cleanings and</u> services determined to be medically necessary, as defined in section 17b-259b, including dentures, shall not be subject to such payment cap. Dental benefit limitations shall apply to each client regardless of the number of providers serving the client. The commissioner may recoup

payments for services that are determined not to be for an emergency condition or otherwise in excess of what is medically necessary. The commissioner shall periodically, but not less than quarterly, review payments for emergency dental services and basic restoration procedures for appropriateness of payment. For the purposes of this section, "emergency condition" means a dental condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate dental attention to result in placing the health of the individual, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy, cause serious impairment to body functions or cause serious dysfunction of any body organ or part.

(b) The Commissioner of Social Services may implement policies and procedures necessary to administer the provisions of this section while in the process of adopting such policies and procedures as regulation, provided the commissioner **[**prints**]** posts notice of intent to adopt regulations **[**in**]** on the **[**Connecticut Law Journal**]** eRegulations System not later than twenty days after the date of implementation. Policies and procedures implemented pursuant to this section shall be valid until the time final regulations are adopted.

Sec. 2. Section 17b-282d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2025*):

(a) The Commissioner of Social Services shall modify the extent of nonemergency adult dental services provided under the Medicaid program. Such modifications shall include, but are not limited to, providing one periodic dental exam, **[**one dental cleaning**]** two dental cleanings, periodontal therapy and one set of bitewing x-rays each year for a healthy adult. For purposes of this section, "healthy adult" means a person twenty-one years of age or older for whom there is no evidence indicating that dental disease is an aggravating factor for the person's overall health condition.

(b) The commissioner may implement policies and procedures

necessary to administer the provisions of this section while in the process of adopting such policies and procedures in regulation form, provided the commissioner [prints] posts notice of intent to adopt regulations [in] on the [Connecticut Law Journal] eRegulations System not later than twenty days after the date of implementation. [Such policies and procedures shall remain valid for three years following the date of publication in the Connecticut Law Journal unless otherwise provided for by the General Assembly. Notwithstanding the time frames established in subsection (c) of section 17b-10, the commissioner shall submit such policies and procedures in proposed regulation form to the legislative regulation review committee not later than three years following the date of publication of its intent to adopt regulations as provided for in this subsection. In the event that the commissioner is unable to submit proposed regulations prior to the expiration of the three-year time period as provided for in this subsection, the commissioner shall submit written notice, not later than thirty-five days prior to the date of expiration of such time period, to the legislative regulation review committee and the joint standing committees of the General Assembly having cognizance of matters relating to human services and appropriations and the budgets of state agencies indicating that the department will not be able to submit the proposed regulations on or before such date and shall include in such notice (1) the reasons why the department will not submit the proposed regulations by such date, and (2) the date by which the department will submit the proposed regulations. The legislative regulation review committee may require the department to appear before the committee at a time prescribed by the committee to further explain such reasons and to respond to any questions by the committee about the policy. The legislative regulation review committee may request the joint standing committee of the General Assembly having cognizance of matters relating to human services to review the department's policy, the department's reasons for not submitting the proposed regulations by the date specified in this section and the date by which the department will submit the proposed regulations. Said joint standing committee may review the policy, such reasons and such date, may schedule a hearing thereon and may make

a recommendation to the legislative regulation review committee.**]**

Sec. 3. (NEW) (*Effective July 1, 2025*) (a) As used in this section, (1) "mobile dental clinic" has the same meaning as provided in section 17b-282f of the general statutes, and (2) "school-based health center" and "expanded school health site" have the same meanings as provided in section 19a-6r of the general statutes.

(b) The Commissioner of Social Services shall not require that separate dental services and procedures be provided to a patient in a single visit as a condition of Medicaid payment for Medicaid-eligible dental services or treatment provided at a mobile dental clinic, school-based health center or expanded school health site. The commissioner shall provide Medicaid payment for each Medicaid-eligible service and procedure separately billed and not require that reimbursement be provided through a bundled payment methodology that provides one aggregate payment for separate dental services and procedures. The commissioner shall, in accordance with the provisions of chapter 54 of the general statutes, adopt regulations to implement the provisions of this section. The commissioner may implement policies and procedures necessary to administer the provisions of this section while in the process of adopting such policies and procedures as regulation, provided the commissioner posts notice of intent to adopt regulations on the eRegulations System not later than twenty days after the date of implementation. Policies and procedures implemented pursuant to this section shall be valid until the time final regulations are adopted.

This act shall take effect as follows and shall amend the following sections:		
Section 1	*July 1, 2025*	17b-282c
Sec. 2	*July 1, 2025*	17b-282d
Sec. 3	*July 1, 2025*	New section

HS *Joint Favorable*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 26 $	FY 27 $
Social Services, Dept.	GF - Cost	2.2 million	2.2 million

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill results in a cost to the Department of Social Services (DSS) of approximately $2.2 million in FY 26 and FY 27 due to increasing Medicaid payments for certain dental services.

Based on FY 24 data, the increased costs reflect: (1) excluding prevention services from the annual cap on Medicaid dental payments ($350,000), and (2) expanding coverage to include a second dental cleaning per year ($1.8 million).

The state will also experience increased costs associated with removing the requirement that certain providers perform separate dental services in one visit as a condition of Medicaid payment. The actual cost to DSS is dependent on the number of providers who currently provide more than one dental service to a client in the same visit and instead provide those services in multiple visits.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

OLR Bill Analysis
SB 1299

AN ACT CONCERNING MEDICAID-COVERED DENTAL CARE.

SUMMARY

This bill expands nonemergency adult dental services for medical assistance recipients by (1) excluding prevention services (e.g., oral exams and dental cleaning) from the $1,000 annual cap on medical assistance payments and (2) including coverage for periodontal therapy and two, rather than one, dental cleanings per year.

Existing law allows the Department of Social Services (DSS) to implement policies and procedures on nonemergency adult dental services while adopting regulations. The bill conforms law to practice by requiring DSS to post notice of intent to adopt regulations on the eRegulations system rather than in the Connecticut Law Journal and makes technical changes to delete obsolete provisions.

The bill also prohibits DSS from requiring that mobile dental clinics, school-based health centers, and expanded school health sites provide separate dental services and procedures to a patient in a single visit as a condition for Medicaid payment.

EFFECTIVE DATE: July 1, 2025

SINGLE VISITS FOR MEDICAID REIMBURSEMENT

The bill prohibits DSS from requiring certain clinics and health centers to provide separate dental services to a patient in a single visit. This applies to the following facilities:

1. mobile dental clinics, which are preventative or restorative dental services offered by a licensed dentist or dental hygienist from a van or using portable equipment at various locations, and

2. school-based health centers and expanded school health sites, which are health centers located in a school facility, organized through school, community, and health provider relationships, and administered by a sponsoring facility.

School-based health centers provide comprehensive on-site medical and behavioral health services. Expanded school health sites provide medical or behavioral health services (e.g., dental services, health education, and health screening).

The bill requires the DSS commissioner to make a Medicaid payment for each Medicaid-eligible service provided by the facilities. It prohibits her from requiring reimbursement through a bundled payment methodology that makes one aggregate payment for separate dental services and procedures.

The bill requires the DSS commissioner to adopt regulations to implement the bill's single visit provision and authorizes her to implement policies and procedures while in the process of adopting regulations. Policies and procedures remain in effect until regulations are adopted. She must post notice of her intent to adopt regulations on the eRegulations system within 20 days of implementing them.

COMMITTEE ACTION

Human Services Committee

Joint Favorable
Yea 23 Nay 0 (03/04/2025)