



Improving Dental Coverage in Nebraska Medicaid



Access to Dental Health Care in Nebraska Medicaid is Critical

Improved access to oral health care presents a wide range of benefits, from improving individual health to addressing racial disparities to supporting the economy.

Medicaid

Medicaid provides health coverage, including some dental coverage, to hundreds of thousands of low-income Nebraskans. Medicaid supports Nebraskans' health and well-being, and also our workforce, health systems, and economy.

Health

Untreated oral health problems are linked to numerous poor health outcomes - not just in the mouth but throughout the body.

Economy

Increased access to dental care can reduce costs, help avoid emergency department visits, and improve job prospects for patients.

Addressing Disparities

Black and Hispanic adults are more likely to face cost barriers to dental care than white adults. Improving access to dental care in Medicaid is one way to address some of those barriers.

Current Access to Dental Care for Nebraskans with Medicaid Leaves Coverage Gaps

What's Included in Dental Coverage for Kids and Adults with Nebraska Medicaid?

Medicaid dental coverage is different for children and adults. Children enrolled in Medicaid and the Children's Health Insurance Program (CHIP) have access to a wide range of preventive and medically necessary comprehensive health care services until age 21.

For adults, Nebraska Medicaid currently has an annual cap on dental services at only \$750 (see right for anticipated changes to this cap) and provides a "limited" dental benefit covering a subset of diagnostic, preventive, and minor restorative procedures. A majority of adult Nebraskans with Medicaid coverage are not utilizing their dental coverage, indicating that significant barriers persist to accessing oral health services.

December 2023 Update: Changes Coming to Nebraska Medicaid Dental Coverage

Managed Care Organizations (MCOs):

Starting in 2024, Nebraska Medicaid will transition from one dental benefits manager to an integrated plan with both dental and medical care provided by three MCOs.

Additional Dental Changes Are Pending:

Nebraska DHHS has proposed the following regulatory and State Plan Amendment changes which have not yet been implemented:



Removal of the \$750 Dental Cap

Caps on expenditures for oral health services limit the potential to restore or maintain Medicaid enrollees' oral health to prevent more severe, costly, and emergent disease. Removing the cap will increase access to the most appropriate services and care.



Reimbursement for Public Health Dental Hygienists (PHDH)

Allowing for Medicaid reimbursement of this independent provider type will expand access to dental services. PHDHs provide services in a wide range of community settings, including hospitals, school-based programs, public health clinics, and others.



Removal of Teledentistry

The flexibility and portability possible with telehealth presents opportunities for oral health providers to expand their reach and meet patients in their communities. Instead of eliminating these opportunities, Nebraska DHHS should maximize use of teledentistry to improve access to care.

For more information, resources, and full citations, see the full brief:



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Access to Dental Providers Remains a Struggle for Nebraskans

Even with dental coverage, Nebraskans have a hard time finding a provider accepting new Medicaid patients.

Utilization of Nebraska Medicaid Dental Coverage Remains Low

Having dental coverage is critical, but actually utilizing that coverage to access dental care makes coverage meaningful. Unfortunately, the majority of adults and a growing percentage of children with Nebraska Medicaid do not utilize their Medicaid dental coverage.

The reasons for under-utilization of dental coverage among Medicaid enrollees are likely wide-ranging. Common barriers include significant limits on treatment imposed by dental caps, difficulties finding a dentist that accepts Medicaid, long wait times, distance to a Medicaid provider, and problems accessing emergency care and follow-up.

“I have had a hard time finding a dentist... Most providers don’t accept Medicaid... I’ve had to call around to place to place to see if they accept it.”

- Nebraska Medicaid Enrollee

What More Can Be Done to Improve Access to Dental Care for Nebraskans with Medicaid?

Below are several policy options to improve access to oral health services.

Accurate Dental Provider Search Tools and Data

- MCOs should provide updated and comprehensive dental provider search tools for enrollees;
- Accurate and accessible provider data should be available to the public;

Increase the Number of Providers Seeing Medicaid Patients

- Encourage providers to enroll in Medicaid and accept more Medicaid patients with higher reimbursement rates, loan forgiveness, or other incentives;
- Join an interstate compact to bolster the Nebraska dental provider workforce;
- Reimburse dental professionals for all services within their scope of practice;
- Expand the workforce with new dental provider types;
- Reduce administrative burdens for providers;

Provide More Medicaid Coverage and Services to Nebraskans

- Leverage telehealth to increase provider reach, and reduce patient travel time;
- Ensure access to and utilization of comprehensive dental coverage for all Medicaid categories, including pregnancy-specific coverage; and

Continue to Solicit and Prioritize Feedback from Medicaid Enrollees.



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