



## State Selection of Dental Benchmarks within Essential Health Benefits Summary\*

State	EHB Benchmark Plan	Pediatric Dental Supplement	Status
Arizona	State Employee Benefit: United Healthcare EPO	FEDVIP	Submitted to HHS
Arkansas	BCBS Health Advantage Point of Service Plan	AR CHIP	DOI Recommendation
California	Kaiser Small Group HMO Plan	CA CHIP	EHB Legislation Approved by Governor
Colorado	Kaiser Ded/CO HMO 1200D	CO Child Health Plan Plus	Submitted to HHS
Connecticut	ConnectiCare HMO	CT CHIP (Husky B)	HIX Board Recommendation
Delaware	BCBS Small Group EPO	To Be Supplemented	Health Care Commission Recommendation
District of Columbia	BCBS CareFirst BluePreferred	To Be Supplemented	HIX Insurance Subcommittee Recommendation
Hawaii	HMSA's Preferred Provider Plan	To Be Supplemented	Submitted to HHS
Illinois	BCBS IL BlueAdvantage Small Group Plan	AllKids Dental Package	EHB Workgroup Recommendation
Kansas	BCBS of KS Comprehensive Plan	KS CHIP	DOI Recommendation
Kentucky	Anthem Preferred Provider Organization (PPO)	KY CHIP	Submitted to HHS
Maryland	Maryland State Employee Plan	MD CHIP	HCRC Recommendation
Massachusetts	BCBS MA HMO Blue Small Group Plan	HPHC Best Buy HMO Dental Benefit	Health Connector Board Recommendation
Michigan	Priority Health HMO Plan	MICChild Dental Program	Financial/Insurance Regulation OFC Recommendation
Mississippi	BCBS MS Network Blue PPO	To Be Supplemented	DOI Recommendation
Nebraska	High Deductible Health Savings Option	To Be Supplemented	Submitted to HHS
Nevada	Small Employer HMO Plano	To Be Supplemented	HIX Board Recommendation
New Hampshire	Matthew Thornton Blue	To Be Supplemented	Submitted to HHS
New Mexico	Lovelace Classic PPO Plan	To Be Supplemented	Submitted to HHS
New York	Oxford EPO	NY CHIP	Submitted to HHS
North Dakota	Sanford Health Plan	ND CHIP	Submitted to HHS

State	EHB Benchmark Plan	Pediatric Dental Supplement	Status
Oregon	PacificSource Preferred CoDeduct Plan	HealthyKids Plan	HIX Board Recommendation
Rhode Island	United Health Care Choice Plus	FEDVIP	HCR Executive Committee Recommendation
Utah	Utah Basic Plus State Employee Plan	Dental Benefit in EHB Benchmark	DOI Recommendation
Vermont	BCBS Vermont	VT CHIP	DVHA Recommendation
Virginia	Anthem Small Group PPO	Smiles for Children (Medicaid)	EHB Subcommittee Recommendation
Washington	Regence Innova Small Employer Plan	WA CHIP	DOI published rules

\*Summary includes EHB benchmark plans for states that have taken public action towards finalizing an EHB recommendation. This is a working document and changes are made continuously, please contact NADP for any corrections, edits or questions. The following pages include historical details on EHB development in all 50 states and the District of Columbia.

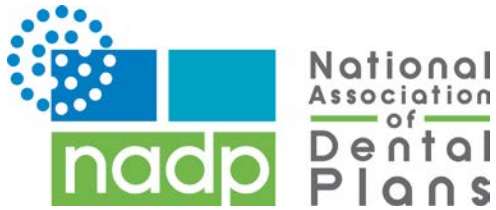
#### **NADP DESCRIPTION**

NADP is the largest non-profit trade association focused exclusively on the dental benefits industry, i.e. dental PPOs, dental HMOs, discount dental plans and dental indemnity products. NADP's members provide dental benefits to over 90 percent of the 176 million Americans with dental benefits. Our members include the entire spectrum of dental carriers: companies that provide both medical and dental coverage, companies that provide only dental coverage, major national carriers, regional and single state companies, as well as companies organized as non-profit plans.

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*NADP Issue Brief "EHB Dental Benchmarks" includes dental costs for pediatric oral services in the Essential Health Benefit benchmarks. View and download from the [NADP website](http://www.nadp.org).*



## State Selection of Dental Benchmarks within Essential Health Benefits History

State	Date	Summary	Resources
Alabama	10.1.12	AL Gov. Robert Bentley informed HHS Secretary Kathleen Sebelius that his state won't select an EHB benchmark plan for a number of reasons, including there's not enough information to make a responsible decision as well as, the EHB parameters block states from considering health savings accounts and related plans.	
	June 2012	AL released an analysis of the benchmarks and coverage required under the federal benchmark guidance. Traditional dental coverage is included in the state employee policy but limited to diagnostic and preventive in the small employer plan.	<a href="#">Link to Alabama EHB Analysis</a>
Alaska	6.21.12	Department of Health and Social Services HIX planning report indicates that a comparison study is needed to determine EHB.	<a href="#">Final HIX planning report</a>
Arizona	9.28.12	In a letter to HHS, Gov. Brewer selected the state employee benefit-United Healthcare EPO, for the medical EHB with pediatric dental and vision coverage supplemented by the FEDVIP plan.	
	9.10.12	while a decision hasn't been made yet, AZ will not be selecting a federal plan for the benchmark. Mercer plans to release updated report.	
	6.28.12	DOI presents on EHB process and seeks public comment via survey due <u>August 1</u> .	
	6.1.12	AZ DOI had Mercer release a report on EHB. Mercer found: "the MetLife FEDVIP plan to be the richest <i>dental</i> benefit among the three, then the State CHIP benefit followed by the FEHBP BCBS Standard plan as the leanest. Should the State need to supplement its chosen benchmark plan with one of the above options, Mercer suggests additional analysis to determine the exact benefit richness of the options."	<a href="#">Mercer Report on AZ EHB</a>

State	Date	Summary	Resources
Arkansas	9.21.12	DOI publishes EHB recommendation: AR BCBS Health Advantage Point of Service Plan with AR CHIP Plan as dental supplement. Uncertainty about MN Ortho lent to this decision: "Of the two plans that are allowed to be considered, the federal plan offers full orthodontia coverage and the CHIP plan does not cover orthodontia at all. The PMAC seemed interested in a requirement for medical orthodontia. However, because there is not a benchmark plan that offers the limited pediatric dental benefit of medical orthodontia and because the majority of orthodontia treatment is cosmetic, the PMAC recommended in a unanimous vote that the CHIP pediatric dental benefit be used to supplement the benchmark plan."	<a href="#">AR DOI EHB Recommendation</a>
	7.30.12	The insurance department holds a hearing 7.31.12 for public input on the state's EHB package. A state regulation issued last month provides the commissioner with the final say in the decision.	
	7.9.12	Insurance Commissioner Jay Bradford issued a proposed rule last week that enables his office to choose the state's benchmark EHB plan by the end of September. The department is planning a public hearing later this month to get feedback on the benchmark selection process.	
California	10.10.12	CA Health Benefits Review Program, which responds to requests from the State Legislature to provide independent analyses of proposed benefit mandates, published a policy brief on pediatric dental and vision in essential health benefits.	<a href="#">Policy Brief: Pediatric Dental and Pediatric Vision</a>
	9.30.12	Gov. signs A 1453/S 951.	
	9.12.12	EHB legislation passed and is expected to be signed by Gov. Brown by the deadline of September 30th. Final bill includes "surgical procedures for jaw bones" and "anesthesia for dental" in health/medical section.	
	8.23.12	The EHB legislation A 1453/S 951 has been amended and passed through committees but not the full assembly (see 4.16.12 below). Pediatric dental benchmark of the 2011-2012 California Health Families Program is chosen as benchmark in the legislation. Bill must pass by final recess on <u>August 31, 2012</u> . CA CHIP dental program includes prevention, fillings, sealants for permanent, x-rays, root canals, oral surgery, crowns and bridges, dentures and MN ortho (Provided to subscribers under the age of 19 through the CA Children's Services Program (CCS) when condition meets the CCS program criteria)	<a href="#">Summary of Benefits of CA Health Families; Dental at bottom</a>
	7.24.12	Legislation (SB 951) approving a Kaiser small group HMO as California's essential health benefits passed in committee. Similar legislation (AB 1453) is in the Senate.	

State	Date	Summary	Resources
	6.22.12	CA DOI: Hosts a hearing related to the EHB and reviews their benefit comparison document for each of their 10 benchmark options they are reviewing.	<a href="#">EHB Hearing Documents from 6.22.12</a>
	4.16.12	A bill setting the state's essential health benefits benchmark plan has started to work its way through the Legislature. The bill, AB 1453, selects the Kaiser small group HMO plan as the state's benchmark and includes the CHIP dental. It won approval from the lower chamber's health committee last week, and is now moving on to the appropriations committee.	
	Jan 2012	CADP Meeting: Public agencies (DMHC, DOI and EX) forwarded comments on EHB, Legislature also believes this should be their purview	
Colorado	9.27.12	In a letter to HHS, Gov. Hickenlooper, the HBE and the Dept. of Regulatory Agencies select the largest small group plan - the Kaiser Permanente Ded/CO HMO 1200D. CO will supplement the EHB with the CO's Child Health Plan Plus (CHP+) for pediatric dental. (See 8.31 for services)	<a href="#">CO Letter to HHS</a>
	8.31.12	DOI, CO Gov. & HBE recommends benchmark plan and asks for comments by <u>September 10</u> . EHB recommended plan is Colorado's largest small group plan, Kaiser Ded/CO HMO 1200D, which does not cover pediatric dental. Board recommends for dental, the CO's Child Health Plan Plus (CHP+) dental services benefit, which includes preventive and diagnostic services, basic restorative services, oral surgery and endodontics care.	<a href="#">CHP+ Information; Dental plan link to the left</a>
	7.30.12	The exchange board holds a public meeting <u>July 31</u> on the state's options for essential health benefits. It's the second one this month. The exchange legislative oversight committee on Tuesday also meets for the first time in seven months to review the board's latest grant proposal.	
	6.29.12	CO DOI, Gov. office & Health Benefit EX hosted webinar to review benchmark plans. It walked through the benchmark options: None of the three largest small group, largest HMO or state employees plans cover pediatric dental. Public comment through <u>August 5, 2012</u>	<a href="#">DORA (CO DOI) web page on EHB activities</a>
Connecticut	9.27.12	HIX BOD approves Advisory Committee recommendation. (see 7.26)	
	7.26.12	CT Health Insurance Exchange BOD Advisory Committee (AC) recommends a benchmark plan based on the state's largest non-Medicaid HMO: "ConnectiCare HMO," which doesn't provide services for pediatric dental. For supplemental coverage, the AC recommends the state CHIP (HUSKY B) program, which includes preventive and basic dental services (cleanings, fillings, root canals, crowns and MN ortho). Public comment deadline is <u>September 7</u> . The BOD will take an official vote on the plan after the public comment period ends and at next meeting (September 27).	<a href="#">CT HIX website</a>

State	Date	Summary	Resources
	7.26.12	The Exchange shall select the EHB Benchmarks. The EX will appoint an advisory committee of EX Board members and stakeholders.	
	7.23.12	When the exchange board meets this Thursday, it could endorse an essential health benefit benchmark plan. A subcommittee examining the issue earlier this month recommended ConnectiCare's HMO plan, according to a local report.	
	6.4.12	A memo from the CT DOI to the EX Advisory Committee lays out the benchmarks and includes dental. There is an exhibit missing which compares Connecticut's current Husky B dental benefits and the FEDVIP dental plan offered by Aetna. The memo mentions the state has requested further clarification from CCIIO on what dental benefits must be included	
District of Columbia	10.10.12	DC HIX to present its EHB submission to CCIIO.	
	9.26.12	NADP submits comments on EHB selection.	<a href="#">NADP Comments</a>
	9.24.12	Executive Board of Health Benefits Exchange Authority to hold public meeting regarding EHB recommendations.	<a href="#">DC Essential Health Benefits Bulletin</a>
	8.29.12	Subcommittee Analysis: The Essential Health Benefits Bulletin's final report also provided guidance on inclusion of pediatric dental and vision benefits in the EHB package. "In the Report, Compass estimated the cost of pediatric dental services to be around 1%, or \$4 PMPM of the costs of the average plan. Further, the Report estimated the cost of pediatric vision services to be around 0.5%, or \$2 PMPM of costs of the average plan. They found these figures to be reasonable based on the average PMPM of \$437 cited by the Mercer Report. The report concludes that the District should look to the FEDVIP dental and vision programs to supplement pediatric benefits as necessary." The DC report was based on a comparison by Compass of estimates provided for various states, including CA's Milliman report. Comments are due <u>September 28, 2012</u> .	
	8.27.12	The Subcommittee will be releasing the long-awaited Essential Health Benefits (EHB) bulletin for public comment on Wednesday, <u>August 29</u> . This will trigger the 30-day stakeholder comment period, concluding on Friday, <u>September 28</u> .	
Delaware	9.6.12	Health Care Commission presents EHB recommendation of the BCBS Small Group EPO plan. Pediatric dental will be supplemented "once final guidance has been issued by HHS."	<a href="#">Health Care Commission Presentation</a>

NADP Issue Brief "EHB Dental Benchmarks" includes dental costs for pediatric oral services in the Essential Health Benefit benchmarks. View and download from the [NADP website](#).

State	Date	Summary	Resources
	Aug 2012	DE releases EHB FAQ which includes a question on the inclusion of adult dental. "A: Adult dental services are not defined within EHB; in the Federal Employees Plans will cover preventive adult dental services with several cost sharing provisions."	<a href="#">DE DHHC Website on EHB &amp; Exchange updates</a>
	6.15.12	DE Health Care Commission (under the DE Health and Social Services Dept.) provides EHB Report and asks for comments by <u>August 2, 2012</u> . They list the DE Health Children (CHIP) benefit and FEDVIP as options but no details. (One of their state mandates includes dental services for children with severe disabilities.) Forums to be held on <u>June 27, 2012</u> and <u>July 17, 2012</u> .	
	Summer 2012	The Delaware Health Care Commission is studying essential health benefit options.	
Florida	9.28.12	In a letter to HHS, Gov. Rick Scott states: "We await federal guidance to determine the exact impact of a state's selection of a Benchmark Plan, as we are unable to estimate the effects on Floridians without detailed responses" to questions included in the letter.	<a href="#">FL Letter to HHS</a>
	Aug 2012	Governor responds to 8.7.12 request with letter detailing the governor's ACA opposition	
	8.7.12	Associations and nonprofits petition Governor and Insurance Board to consider EHB for Florida.	
Georgia	June 2012	Governor announced plan to wait until after November election to decide on HIX. No plans or recommendations from GA Health Exchange Advisory Committee on EHB.	
	Jan 2012	Bill to establish state-based Exchange failed.	
Hawaii	10.1.12	Hawaii DCCA publishes benchmark selection of HMSA's Preferred Provider Plan (small group). In benefit description chart, the section on pediatric dental notes: "Not Covered now but will be as one of required benefits under ACA."	<a href="#">HI EHB description</a>
	9.10.12	Departments of Commerce and Consumer Affairs (DCCA) and Insurance hold public forum on the selection of benchmark plan.	
Idaho	8.2.12	Workgroup meets with little discussion of EHB.	
	7.23.12	Exchange workgroup formed to study state's options for Exchange and EHB.	

State	Date	Summary	Resources
Illinois	10.1.12	IL has chosen the Blue Cross small group policy as the EHB with the state's All Kids coverage as the standard for children's dental care. All Kids covers the following for children under age 21: cleanings, fluoride, sealants, spacers, crowns, endodontics, periodontics, prosthodontics, extractions, adjunctive general services (including anesthesia and IV sedation) and orthodontia (limited to children meeting or exceeding a score of 42 from the Modified Salzman Index).	
	9.28.12	HCRIC meets to discuss EHB and hear public comments.	
	9.18.12	NADP provided EHB comments	<a href="#">NADP Comments</a>
	9.5.12	IL Health Care Reform Implementation Council (HCRIC) publishes benchmark comparison chart and seeks public comment with <u>September 19</u> deadline. None of the state plans cover pediatric dental. The document indicates that mandated health benefit coverage will include "dental adjunctive services": coverage for anesthesia and other charges incurred in conjunction with dental care provided in a hospital or ambulatory surgical treatment center to: (1) young children under age 6 (2) a person with a medical condition that requires hospitalization for the procedure; or (3) a disabled individual.	<a href="#">IL HCRIC website</a>
Indiana	10.1.12	In a letter to HHS, Insurance Commissioner Stephen Robertson declared that the state would not submit an EHB at this time. The Commissioner notes that, among other reasons for delay, the state has received conflicting information from HHS regarding whether or not purchasing pediatric dental benefit is required and the pediatric age. Also, November concludes the Gov.'s second term and the candidates have not settled on any EHB.	
	9.19.12	Healthcare reform workgroup and DOI present update on HIX and EHB to Health Finance Committee. Comparison chart included. No state option offers pediatric dental. Recommendation is for the CHIP for supplement. Group indicates uncertainty about many aspects of EHB and has submitted 3 sets of comments to HHS with no response.	<a href="#">ACA resources webpage-9/19 presentation included under "related documents"</a>
Iowa	10.1.12	In a letter to HHS, Insurance Commissioner Susan Voss states that Iowa will await further information via a formal rulemaking process before making a decision on an Essential Health Benefits package.	
	5.30.12	Workgroup presents webinar confirming current study of EHB by IA Department of Human Services.	
	10.15.11	Workgroup reports that it plans to contract with IA Department of Human Services to conduct analysis on EHB options	



State	Date	Summary	Resources
	Quarter 2, 2011	IDPH, DHS and IID form an Interagency Health Exchange Workgroup that plans to field a study of EHB benchmarks	<a href="#">Interagency Workgroup webpage</a>
Kansas	9.28.12	"The Kansas governor is not going to file," Sandy Praeger, the state's independently elected state insurance commissioner, said this week. In preparation, Praeger's office went through the process of selecting a benchmark plan. It commissioned an actuarial study and conducted a public hearing. She submitted the choice to Governor Sam Brownback on Monday. Her office chose the state's most popular small group plan, which is the one that HHS would end up selecting by default, if the state does not act.	
	9.24.12	In a letter to Gov., DOI recommends the largest small group plan, by enrollment – the Blue Cross Blue Shield of Kansas Comprehensive Plan with Kansas CHIP as the dental supplement. The letter notes, "Selecting CHIP provides more continuity of care between CHIP and the marketplace and would result in less disruption as families transition between CHIP and the Kansas private insurance market."	
	8.24.12	Kansas Insurance Department and Milliman publish benchmark plan options. None of the state plans cover pediatric dental. KS currently mandates pediatric dental anesthesia as part of medical. Supplemental plan options include FEDVIP and KS CHIP. Public comments due <u>September 12</u> . DOI will submit findings to Governor for final decision.	<a href="#">KS HIX website</a>
Kentucky	10.1.12	KY DOI recommended that the Anthem Preferred Provider Organization (PPO) plan serve as the EHB. The Kentucky Children's Health Insurance Program (KCHIP) will be the dental supplement.	<a href="#">DOI press release</a>
	8.21.12	NADP submitted comments on EHB selection	<a href="#">NADP Comments</a>
	Aug 2012	KY DOI publishes benchmark plan comparison. None of the state plans cover pediatric dental; however, each plan does include some coverage for dental services and anesthesia related to accident or injury under medical. Public comment due <u>August 21</u> .	<a href="#">KY EHB website</a>
Louisiana	10.4.12	State officials say they can't possibly set their own EHB without more guidance, and without it, they won't accept the default plan from Washington.	
	9.27.12	In a letter to HHS, Louisiana's Secretary of Health and Hospitals Bruce Greenstein and Insurance Commissioner James Donelson state that Louisiana will not be declaring an EHB at this time.	

State	Date	Summary	Resources
	3.7.12	State health secretary Bruce Greenstein said Louisiana reviewed the December essential health benefits bulletin. "It kinda said nothing," Greenstein said. "It's not worth anything, there's no authority behind the bulletin." The state has determined if it decides to choose its own EHB benchmark plan, the decision would come from the governor, he said.	
Maine	9.24.12	Health care advocates, who had been assuming the state would opt for the federal default, are meeting this week with the insurance superintendent and Gov. Paul LePage's top health adviser.	
	2.1.12	ME releases benefit comparison chart with the state employees plan covering pediatric dental but the other non-federal options do not cover dental unless injury related.	
Maryland	9.27.12	HCRCC voted to approve State Employee Health plan as EHB. Presentation recommends CHIP as dental supplement, which would cover x-rays, sealants, periodontics and prosthodontics all with some limits for children under 21. Both the FEDVIP and CHIP plans were noted as impacting premiums by \$6.25-7.75. Committee does not expect adult dental to be covered under EHB.	
	9.27.12	HCRCC will convene at a public meeting to select EHB.	<a href="#">Sept 27 Meeting Agenda</a>
	9.12.12	Planned meeting of the HCRCC to ratify final EHB plan. Agenda and minutes unpublished.	<a href="#">MD HCR website</a>
	8.28.12	Member company presented basic differences of FEDVIP v. CHIP dental benefits at the Health Care Reform Coordinating Council.	
	7.18.12	The Wakely Report provides a comparison of benefits and premium impacts of the benchmarks, but specifically noted that since dental will need to be supplemental, the premium impact was not included. Comments due <a href="#">August 9, 2012</a> .	
	7.12.12	MD is waiting for Wakely consulting to finish their report on the EHB, and then comments will likely be due on August 8.	
	1.13.12	Maryland has put forward a plan that would mandate a wide range of public input. The Legislature is considering a bill that would allow the governor's health care reform coordinating council to make the final call on the benchmark plan by Sept. 30. But that would be only after the council conducted a comparative analysis of each plan and considered public input from stakeholders and formed an advisory group.	

State	Date	Summary	Resources
Massachusetts	10.17.12	The benchmark plan selected for the state is BCBSMA HMO Blue, which is the largest small group plan in the state. The state plans to supplement this with the pediatric dental benefit offered in its HPHC Best Buy HMO, which covers preventive care including two visits pmpy, cleaning, x-rays and fluoride treatment for children through age 12.	<a href="#">Health Connector Board Meeting Presentation</a>
	9.19.12	The Executive Office of Health and Human Services held its quarterly ACA stakeholder update meeting. The Division of Insurance gave a comprehensive overview of the EHB selection process and indicated that it is leaning towards selecting the largest small business plan as the state's benchmark. DOI also expressed that it would be supplementing the benchmark with pediatric dental benefits from CHIP or FEDVIP and that the benefits are largely similar. DOI did not indicate which of the two options it is leaning towards but asked for any comments to be submitted by September 26th.	
	5.25.12	MA Insurance Reform Workgroup held stakeholder meeting re "Dental Services and Products Under ACA."	
	4.19.12	Updated benchmark comparison published. Two of largest small group plans cover some dental for children (i.e. 2 visits pmpcy, to age 12).	
Michigan	9.25.12	MI Office of Financial and Insurance Regulation publishes MI EHB Executive Report and recommends supplementing the Priority Health HMO plan with the MI Child dental program. The state's CHIP program is the "lowest-cost pediatric dental plan supplement option, at \$4.00-5.25 PMPM premium impact." The Wakely report spread the PMPM premium over all members—not just pediatric/family population. MI Child BCBSM covers routine checkup, x-rays, cleanings, fluoride treatment, spacers (limited), endodontics, periodontics and prosthodontics (with limits) for children up through 18.	<a href="#">OFIR EHB Executive Report</a>
	9.5.12	MI Office of Financial and Insurance Regulation publishes MI EHB Executive Report and recommends supplementing the Priority Health HMO plan with the MI Child dental program. The state's CHIP program is the "lowest-cost pediatric dental plan supplement option, at \$4.00-5.25 PMPM premium impact." The Wakely report spread the PMPM premium over all members (as opposed to just pediatric population). MI Child BCBSM covers routine checkup, x-rays, cleanings, fluoride treatment, spacers (limited), endodontics, periodontics and prosthodontics (with limits) for children up through 18.	<a href="#">OFIR EHB Executive Report</a>

State	Date	Summary	Resources
	5.21.12	Mentioned in presentation that the state was waiting for guidance from HHS on dental benchmarks requirements outside of FEDVIP and CHIP options. A specific dental comparison chart of the MI Child Dental Plan (CHIP) illustrates they cover almost the same services, but does not provide costs. Comments due <u>June 29, 2012</u> .	<a href="#">LARA (MI DOI) EHB page, including Dental Comparison Chart</a>
Minnesota	10.3.12	The Minnesota Department of Commerce is trying to sort through its options and hasn't made a selection. The state agency submitted information to HHS about its coverage mandates, and it's eyeing an opportunity to submit a plan when HHS proposes an EHB rule.	
	7.12.12	Workgroup recommends that Task Force seek additional guidance from HHS and committed to presenting revised recommendations to 9.6.12 meeting.	<a href="#">HCR Task Force webpage</a>
	2.6.12	Access Workgroup presents benchmark analysis to MN Health Care Reform Task Force. None of the state plans cover pediatric dental; however, each plan does include some coverage for dental services and anesthesia related to accident or injury under medical.	<a href="#">EHB comparison chart</a>
Mississippi	10.10.12	Mississippi selects BCBS MS Network Blue PPO for benchmark. Pediatric dental not yet supplemented.	<a href="#">MS EHB Chart</a>
	10.8.12	Insurance Commissioner likely to select the BCBS MS Network Blue PPO for benchmark.	
	6.13.12	Advisory Board to the EX released their final recommendations which included a blind selection of the various Exchanges without a guide of the selections chosen. Dental has not been mentioned in the reports.	<a href="#">MS DOI Health Care Reform page w/ EHB Documents</a>
	3.6.12	NADP submitted comments to Insurance Commission regarding inclusion of dental benefits in EHB discussion.	<a href="#">NADP Comments</a>
Missouri	7.26.12	Gov. Nixon expects legislature to work on Exchange elements in 2013. No special session expected at this time. MO mandated insurance benefits include coverage for accidental dental injury and anesthesia in hospital setting.	
Montana	10.3.12	"We have not and we will not submit an EHB benchmark," said insurance department spokesman Lucas Hamilton, explaining that the state Legislature historically makes the call on mandated benefits. "Montana has a biennial legislative session that will not meet until after the federal fallback kicks in," he added.	
	2.24.12	Commissioner of Securities and Insurance presents basic options for EHB and HHS deadline.	

State	Date	Summary	Resources
Nebraska	10.1.12	Gov. Heineman submitted an EHB selection to HHS. The Nebraska plan is a high-deductible health savings option, he said. With an in-network provider, the deductible would be \$4,000 for an individual and \$8,000 for a family. The governor's selection was not among the options discussed at a Department of Insurance public hearing in August or among the plans analyzed by the department's consultant, Mercer Government Human Services Consulting.	
	8.16.12	NE DOI presents EHB options in public hearing. No recommendation made.	
	7.23.12	The insurance department has posted Mercer's recent analysis of the state's essential health benefit options. The report concluded a Coventry HMO plan would be the most cost-effective option. Dental is not included in the Coventry HMO. TMJ is state-mandated benefit.	<a href="#">NE DOI EX Web page with EHB Documents</a>
Nevada	10.1.12	In a letter to HHS, Commissioner of Insurance Scott Kipper states, "Faced with the lack of transparency and formal rules, Nevada is unable to select an appropriate EHB package."	<a href="#">NV Letter to HHS</a>
	9.24.12	Exchange Director reports on StateReforum webinar that HIX Board has recommended for the DOI: HPN POS, PEBP HDHP and HHP 25 HMO. Comments are due to DOI <a href="#">September 27</a> .	
	9.18.12	After Subcommittee meeting on 9.13, Board met to discuss and make possible recommendation to DOI on EHB. Meeting record unavailable.	
	9.13.12	NV Exchange provides Memo on EHB Benchmarks. Recommends small group (HPN POS C-XV) and either the dental FEDVIP or CHIP.	<a href="#">NV Memo on EHB</a>
	Sep 2012	NV DOI seeks public comment on EHB selection and plans to host several public meetings throughout the state. Comments due <a href="#">September 27</a> .	<a href="#">NV DOI Webpage requesting public comment</a>
	8.20.12	The Plan Certification Subcommittee has meetings on August 20, 2012 and August 29, 2012 (Watch live at 8:30 PST) on EHB to provide recommendation to EX board. On September 13, 2012 will discuss and provide recommendation to the DOI. The 8/29 meeting was cancelled and will now meet prior to the Board meeting on 9/13.	<a href="#">NV Plan Certification Subcommittee Meeting Page</a>
	8.20.12	Memo from the State Exchange stating they do not have the authority to choose the EHB, but can provide for public comments. The Board's recommendation for the benchmark will require review and approval by the DOI.	<a href="#">Memo outlining Exchange responsibilities on EHB</a>
New Hampshire	9.19.12	The Joint HCR Oversight Committee voted to approve the Matthew Thornton Blue plan as the state's benchmark.	

State	Date	Summary	Resources
	9.12.12	Compass presents price comparison for the 3 plans chosen by the Committee: HMO Blue England (small group and HMO), Matthew Thornton Blue (small group) and GEHA. Employee dental recognized as price driver in GEHA. Pediatric dental no longer referenced in comparison although it was included in May report.	
	5.29.12	Joint HCR Oversight Committee meets to discuss benchmark comparison. Small Group and State Employee plans are noted as covering certain dental procedures for children (uncertain if these are medical or more specifically dental)	<a href="#">Joint HCR Oversight Committee Webpage</a>
New Jersey	10.2.12	Gov. Christie told local reporters yesterday that the state doesn't know enough about the costs to submit an EHB plan.	
	Aug 2012	Rutgers Center for Health Policy publishes "Implementing the Essential Health Benefits Requirement in New Jersey: Decision Points and Policy Issues."	<a href="#">Rutgers report</a>
	1.31.12	Department of Banking and Insurance submits questions regarding EHB to HHS. Seeks more clarity about definition of pediatric dental.	<a href="#">ACA webpage</a>
New Mexico	10.17.12	The Division of Insurance notified the Center for Consumer Information and Insurance Oversight (CCIIO) that the Lovelace Classic small group PPO plan has been chosen the Essential Health Benefits benchmark plan for New Mexico. Although the EHB work group had recommended that the DOI select a plan offered to state employees, that plan was ultimately rejected because it failed to include coverage for autism spectrum disorders, a benefit mandated for small group coverage but not for state employees. Press release notes that pediatric dental will be supplemented at a later date.	<a href="#">NM EHB press release</a>
	9.26.12	Workgroup recommends Presbyterian State Employees' Plan as benchmark with CHIP as supplement. Presentation quote: "concern that expensive plan negates intent of exchange; cost considered outside the scope of this workgroup." The CHIP program covers the following for children under 21: cleanings, spacers, fluoride treatment, x-rays, fillings, crowns, endodontics, periodontics, orthodontics (score of 30 or higher on the HLD) and anesthesia.	<a href="#">Workgroup presentation to Advisory Committee</a>
	9.4.12	Workgroup commits to make recommendations to task force at 9.26.12 meeting.	
	7.25.12	EHB Workgroup presents Primer on EHB to HCR Advisory Task Force. No preliminary recommendation made.	<a href="#">NM HCR Advisory Task Force webpage</a>
New York	10.1.12	State selects the largest small group plan, Oxford EPO, as the benchmark. CHIP is chosen as dental supplement, which will cover children under age 19.	
	9.25.12	NY is leaning towards CHIP as supplement for dental.	

State	Date	Summary	Resources
	8.2.12	NY had Milliman do an analysis of their benchmark, including a benchmark comparison and presentation. They noted that some benchmark options did include dental, which could extend to adults. (Federal employee plans include limited coverage for cleanings and simple services. NY state employee plans include full dental coverage).	<a href="#">NY HCR Website: Milliman is on Timeline and Events page</a>
	6.12.12	Wakely releases "Benefit Standardization Study" for the EX but deals with policy choices related to EHB.	<a href="#">NY Exchange page, with link to Wakely Study</a>
	12.16.11	NY requested HHS clarify on pediatric age, as the child-only policies go up to 21 and dependent age is 26. They also requested what the scope of services would include.	
North Carolina	10.3.12	There's also no selection in North Carolina, where Democratic Gov. Bev Perdue declined to run for a second term and the Democratic state insurance commissioner faces reelection in November. The North Carolina insurance department "did not submit a benchmark selection," a department spokeswoman said.	
	5.14.12	NC DOI publishes Wyman EHB analysis. All benchmark options would need dental supplement. Report cites NADP CHIP description to estimate costs.	<a href="#">NC DOI HCR webpage</a>
	2.27.12	On Tuesday, the North Carolina Institute of Medicine meets to figure out what to do about essential health benefits.	
North Dakota	9.28.12	ND DOI submits EHB recommendation to HHS. Plan submitted was the Sanford Health Plan (HMO) with CHIP as the dental supplement, which covers the following for children 18 or younger: cleanings, spacers, fluoride treatment, x-rays, fillings, crowns, endodontics, periodontics, orthodontics (20-point criteria), and oral surgery except cleft palate, which is covered under medical.	
	8.4.12	At the Sept. 6 meeting of the interim Health Care Reform Review Committee, North Dakota Insurance Commissioner Adam Hamm will provide an update on the deadline for EHB package and requirements for state health exchanges. Hamm said at the July meeting that the Sept. 30 deadline set by the U.S. Department of Health and Human Services for states to choose their essential health package was a "soft date," meaning that the agency recommends but does not require that states submit their selection by that date.	
Ohio	9.28.12	In a letter to HHS, Lt. Gov. Mary Taylor states that Ohio will be unable to make an informed recommendation for an EHB at this time. The DOI is "unclear how HHS identified the largest plans... Information [the DOI] received from companies contradicts this and indicates that there are several other possible options."	<a href="#">Ohio's Letter to HHS</a>

State	Date	Summary	Resources
	8.31.11	Milliman submits report regarding planning and design of HIX that compares EHB with Ohio mandates.	<a href="#">Exchange information webpage</a>
Oklahoma	10.1.12	In a letter to HHS, Gov. Fallin asks for more guidance or formal rules and a reasonable time after such are published for states to declare EHBs.	
	2012	Health Insurance Exchange Project suspends activities due to the exhaustion of grant funds.	
	7.24.12	Governor announced she will not call a special session for legislators to address Exchange creation and issues.	
Oregon	8.21.12	HIX Board endorses EHB workgroup recommendation in memo to Governor. Dental supplement is State HealthyKids program, which covers the following for children under 21 (which the board increased from 19): oral exams, x-rays, fluoride treatment, endodontics with limits, crowns with limits, limited prosthodontics and MN ortho (defined as cleft palate or lip only). Adult dental addressed in report but not included.	<a href="#">OR EHB Workgroup Webpage with links to final memo</a>
	July 2012	The recommended benchmark plan is the PacificSource Preferred CoDeduct small group plan. The plan has a pool of funds dedicated for lab and x-rays and provides extensive coverage of women's health services and wellness initiatives. Missing benefit categories that need to be incorporated into the chosen benchmark plan to ensure coverage of the ten statutory categories (e.g., prescription drug, pediatric dental and vision, and habilitative services coverage) have also been chosen based on federal guidance.	
	7.12.12	Oregon is releasing EHB for comments which will be due on <u>July 30</u> .	<a href="#">OR DOI page on SB 91 on metal level policies and EHB</a>
Pennsylvania	9.26.12	In a letter to HHS dated 9.26, Insurance Commissioner Michael Consedine says Pennsylvania doesn't have enough details about EHB requirements to make a decision before the deadline.	
	9.10.12	Associations and nonprofits petition legislators and Department of Insurance to develop and seek public input on EHB.	
Rhode Island	9.26.12	Rhode Island Health Care Reform Executive Committee voted to recommend to the Governor that the MetLife High Option FEDVIP plan be designated as RI's benchmark plan for pediatric dental and that the pediatric age be defined as up to 19.	
	9.13.12	Exchange staff indicated the pediatric age will be to 19, which RI believes is the current/commercial definition, and that they plan to use the FEDVIP plan.	



State	Date	Summary	Resources
	8.30.12	EHB workgroup meets and discusses pediatric age. Group seems to prefer 19.	<a href="#">RI EHB workgroup webpage</a>
South Carolina	9.25.12	NADP submits comments to SC DOI re EHB	<a href="#">NADP Comments</a>
	9.4.12	DOI publishes EHB plan options. The only option that moves beyond dental coverage for injury or accident is the state employee plan, which includes robust dental coverage at no cost to employees (addition of families incurs additional premium). Public comment due <u>September 25</u> .	<a href="#">EHB webpage</a>
South Dakota	11.3.11	HIX taskforce submits final report on planning efforts to Governor.	
Tennessee	9.30.12	In a letter to HHS, Gov. Haslam stated that Tennessee did not have the information necessary to define an EHB. As one of three specific points, the Gov. states "there is a lack of clarity as to how HHS will treat pediatric oral services."	
	7.16.12	The insurance department put out new guidance on Tennessee's essential health benefit options. It's asking for written comment through the next month and plans to hold six public meetings across Tennessee.	<a href="#">TN EHB webpage</a>
Texas	9.28.12	State hopes to have additional federal guidance prior to submitting a benchmark plan selection.	
	8.27.12	TDI Email: The Texas Department of Insurance will host a public forum on Essential Health Benefits on Tuesday, <u>August 28 at 1:00pm</u> .	<a href="#">All resource documents, EHB analysis</a>
	8.22.12	DOI listed under EHB analysis of pediatric services the list from the Summary of Coverage doc: routine eye exams, eye glasses and dental check-ups (limit of 2 annual visits) for children. However; they also coded the coverage as an EHB benefit the state will be required to supplement through a process to be prescribed by HHS.	
Utah	8.30.12	Insurance Department published Rule confirming Task Force's choice of PEHP Utah Basic Plus Plan as EHB. Public comments are due <u>October 15</u> . Public hearing is scheduled for September 24.	<a href="#">UT Insurance Department EHB Rule</a>
	8.16.12	The Legislative Health Reform Task Force decided unanimously to choose as a benchmark one of the high deductible plans available to public employees. Its recommendations now go to the Utah Insurance Commissioner, who will issue emergency rules that must be endorsed by the U.S. Department of Health and Human Services in time for insurers to market plans in October 2013. "We'll review what they've sent us and supplement according to federal rule," said Nancy Askerlund, the commissioner's health and life insurance director. Dental and vision coverage is limited to two check-ups a year for kids ages 3 to 18 and one eye exam for kids 5 to 18.	

State	Date	Summary	Resources
	5.12.12 / Modified 6.7.12	The UT State Legislature had their Office of Legislative Research and General Counsel of the UT State Legislature did a presentation on EHB to the Health System Reform Task Force which seems to be housed under the Chamber of Commerce with a large group of businesses, insurers, consumer groups and others. Dental mentioned as part of the EHB.	<a href="#">Presentation of EHB</a>
Vermont	9.24.12	The state continues a month-long series of forums to educate the public on its efforts to set up an exchange. EHB will also be discussed.	<a href="#">Link to press release (includes meeting dates and locations)</a>
	9.20.12	Green Mountain Board met to vote on EHB package.	<a href="#">Green Mountain Board Meetings</a>
	7.1.12	The Dept. of Health Access recommends the state CHIP for the dental benchmark. They recommend the BCBSVT as the medical benchmark. They present this to the independent Green Mountain Care Board on <u>August 9</u> . The Board will seek public input and approve the EHB package in September.	<a href="#">Health Access EHB Recommendations</a>
Virginia	6.13.12	The Health Reform Initiative Advisory Council received a recommendation from its Essential Health Benefit Package Subcommittee (under the state's Secretary of Health and Human Resources) that the Anthem small group PPO plan be the state's benchmark. If it accepts this recommendation, the Advisory Council would make a similar recommendation to the governor for adoption.  The policy does not include dental (does include vision) and the dental benchmark recommended is Smiles for Children, and is the current Medicaid/FAMIS dental program for children. Some services listed: fluoride, crowns, sealants, MN Braces, cleaning, root canals, space maintainers, x-rays, extractions, fillings, anesthesia and oral disease services.	<a href="#">The EHB Subcommittee's Recommendation</a>
	June 2012	The State is taking comments on EHB.	
	4.30.12	Gov. Bob McDonnell and the Legislature may be waiting for a Supreme Court ruling, but the Virginia Health Reform Initiative is picking up again. The advisory group, chaired by state health Secretary Bill Hazel, meets on Thursday to discuss the essential health benefits decision. The planning council will follow that up with another meeting later in the month.	
	Feb 2012	PWC consultants provided an EHB report. Explains the separate nature of dental. Includes the state employee benchmark include "Expanded Dental." Reviews the two dental benchmarks in basic terms. List of state mandated benefits includes coverage for hospitalization and anesthesia for dental procedures. Includes a benefit comparison chart.	

State	Date	Summary	Resources
Washington	10.24.12	DOI published supplement to EHB proposed rule that references CHIP as dental supplement and outlines covered services.	<a href="#">EHB proposed rule supplement</a>
	9.28.12	State considering CHIP as dental supplement for children through 18.	
	8.28.12	NADP submits comments to Insurance Commissioner re EHB	<a href="#">NADP Comments</a>
	7.18.12	State chooses largest health plan in the small employer market, Regence's Innova plan, for EHB. State CHIP has been discussed as supplemental dental plan.	<a href="#">Washington State Health Care Authority webpage</a>
West Virginia	9.28.12	Gov. Tomblin poses seven questions re EHB selection in a letter to HHS. Questions refer to defining benchmark categories and Medicaid expansion.	
	Summer 2012	State identified subcontractor to analyze EHB options. No reports published.	<a href="#">HIX webpage</a>
Wisconsin	9.28.12	In a letter to HHS, Insurance Commissioner Theodore Nickel renews the state's request for an extension and requests that "HHS not make this important decision on behalf of Wisconsin."	
	2.27.12	After suspending all work on ACA related reform in January, Governor Scott Walker states he will wait until the November elections to figure out path for State Exchange.	
Wyoming	9.7.12	Wyoming Gov. Matt Mead says the state is going to miss its deadline for telling HHS whether it will set up an exchange because HHS hasn't answered his questions.	

#### NADP DESCRIPTION

NADP is the largest non-profit trade association focused exclusively on the dental benefits industry, i.e. dental PPOs, dental HMOs, discount dental plans and dental indemnity products. NADP's members provide dental benefits to over 90 percent of the 176 million Americans with dental benefits. Our members include the entire spectrum of dental carriers: companies that provide both medical and dental coverage, companies that provide only dental coverage, major national carriers, regional and single state companies, as well as companies organized as non-profit plans.

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*NADP Issue Brief "EHB Dental Benchmarks" includes dental costs for pediatric oral services in the Essential Health Benefit benchmarks. View and download from the [NADP website](#).*