September 6, 2011

The Honorable Kathleen Sebelius
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Sebelius:

I am writing to ask for clarification of the treatment of pediatric dental insurance benefits inside and outside the Health Insurance Exchange (Exchange), as established in the Affordable Care Act (ACA). I am also writing to ask you to review how dental and medical policies are offered and priced in the Exchanges to ensure competition, transparency and access.

It is my understanding that while stand-alone dental coverage is allowed inside the Exchange, the language of the ACA could be interpreted to allow only medical plans to cover the dental component of the “essential health benefits package” (EHB) outside of the Exchanges. During the health care reform consideration and debate, the Stabenow-Lincoln dental amendment was adopted by the Finance Committee to allow separate dental policies to offer the children’s dental benefit in EHB, inside and outside of state Exchanges. As you know, the ACA allows separate dental policies to provide coverage for those services inside the Exchange; a stand-alone dental plan, when purchased with another health plan that covers the other essential health benefits, will satisfy the EHB requirements.

However, while the statutory language implementing the Stabenow-Lincoln amendment was clear about allowing separate dental coverage inside the Exchanges, it is unclear concerning coverage outside the Exchanges. Therefore, a significant question remains on how consumers and the small group market outside of the Exchanges will be impacted with regard to the dental benefits in place today for families and children.

Today, 97 percent of all dental policies are offered and priced separately from medical. It is my understanding that the ACA allows qualified health plans to combine medical and dental benefits under a single policy and premium. This could lead to a disruption in care, resulting in children being removed from their parents’ existing dental coverage to have their dental health services provided instead by a medical carrier. Access to pediatric dental coverage is attained when consumers are allowed to choose from a range of affordable dental and medical policies by comparing their options. Offering and pricing dental and medical plans separately encourages competition and transparency among the plans, giving consumers the tools they need to make adequate decisions.
As you work to implement the insurance provisions in the ACA, I respectfully request that you clarify the rules regarding the treatment of stand-alone pediatric dental coverage outside of the Exchanges in the individual and small group markets and consider the impact that combining dental and medical policies may have on consumer access and care.

Thank you for your consideration on this matter.

Sincerely,

Rob Portman