NADP Encouraged by Early FFM Enrollments but says “There’s Still Work to be Done”

HHS Data Shows Strong Demand for Adult Dental Coverage in the Marketplaces

DALLAS -- Some 96 percent of enrollees in stand-alone dental plans (SADPs) are adults 18 to 64 according to data released by HHS last week for states where Marketplaces are operated by the Federally-facilitated Marketplace or FFM. In those states, 21.8 percent of all enrollees (421,941) selected a SADP in addition to their medical plan. Some 18,764 or 4 percent of the enrollees in SADPs were in the 0-17 age group that would be covered by the new pediatric dental benefit created by the Affordable Care Act (ACA) as part of the Essential Health Benefit (EHB) Package.

NADP Executive Director Evelyn Ireland commented, “Exchanges have spurred an important expansion of individual dental benefits which were not widely available in the marketplace. In fact, this is a 14% increase in individual coverage for dental. While there is still work to be done to determine how many additional children are covered for pediatric dental services, this data shows strong consumer demand for adult dental benefits. Adult dental benefits are not subsidized so these consumers are spending out of their own pocket to purchase separate dental coverage. This data is important for states that have not allowed the sale of adult dental benefits to consider. There is a significant opportunity to expand dental coverage for adults as well as children through the offer of adult dental coverage on Exchanges.”

Pediatric dental services are one of the 10 “essential health benefits” that must be offered in the small group and individual market both on and off the Exchanges. SADPs are one of two methods whereby this benefit can be purchased to cover children. The other method is for pediatric dental coverage to be included in a medical plan.
HHS defined the age group to which pediatric dental benefits apply as 0 through 18. The initial FFM data is incomplete with regard to this age group as there is no separate report of 18 year-olds enrolling in dental coverage. Also, there is no information on whether the other 86,000 enrollees in FFM states in 0-17 age group selected medical plans which included pediatric dental. Similar information is also needed from state-run Marketplaces. Finally, the enrollment in Medicaid/CHIP programs, which cover pediatric dental services, was not broken down by age. It would take all of these components to determine the number of children with coverage for pediatric dental services inside of Exchanges.

Ireland continued, “The number of additional children that would get pediatric dental coverage through the new EHB benefit package has been estimated as 4 to 5 million. Some of this enrollment was expected through private coverage either through state Marketplaces or small employers but most was expected to be through public programs. The 19,000 children with stand-alone dental coverage through the FFM states are a small increment toward those estimates. NADP will be collecting information in its annual Enrollment Survey on children covered through small employers for pediatric dental benefits. NADP has also requested additional data from the FFM to determine if the other 86,000 children enrolled in the 0-17 age group through their portal selected medical plans that included pediatric dental as well as age breakdowns for Medicaid/CHIP eligibility determinations.”

One problem with the implementation related to pediatric dental benefits is an IRS rule that does not provide a subsidy when pediatric dental is separate from medical. The dental insurance industry, the dental profession and consumer advocates are working with many members of the Senate to get IRS to change this rule so parents can receive a direct subsidy for the dental coverage they purchase on Marketplaces. Ireland concluded, “For those families that got a subsidy, any additional premium for pediatric dental coverage for their children should be fully subsidized as they have met the percentage of their income the ACA sets for purchasing health coverage. NADP is just completing an analysis that will show consumers in the majority of states are impacted by this issue.”

For additional information, view the NADP Fact Sheet on Stand-Alone Dental Enrollment in Marketplaces located on the Advocacy page of the NADP website.

About NADP

National Association of Dental Plans (NADP), a Texas nonprofit corporation with headquarters in Dallas, Texas, is the “representative and recognized resource of the dental benefits industry.” NADP is the only national trade organization that includes the full spectrum of dental benefits companies operating in the United States. NADP’s members provide Dental HMO, Dental PPO, Dental Indemnity and Discount Dental products to 160 million Americans, approximately 90 percent of all Americans with dental benefits.

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FACT SHEET:
STAND-ALONE DENTAL
ENROLLMENT IN MARKETPLACES

In the Feb. 12 release of enrollment, HHS presented data for the first time on dental enrollment through Marketplaces that are supported by or fully run by the Department of Health and Human Services (including those run in partnership with states, also known as the Federally-facilitated Marketplace or FFM). No information was available in an aggregated form from the State-Based Marketplaces or SBMs. Here are the key facts related to dental from that release:

Marketplace Eligibility Determinations and Plan Selection

- Number of eligible persons who have selected a medical plan through the SBMs and FFM: 3.3 million
  - 1.4 million through SBMs and 1.9 million through FFM.
  - Of the 1.9 million through FFM, 104,362 or 5% were under 18 (0-17).
- Number of eligible persons who have selected a stand-alone dental plan (SADP) through the FFM: 421,941, which is 21.8% of total FFM enrollees. Of the 421,941:
  - 18,764 or 4% of those enrolling in stand-alone dental plans were under age 18 (0-17); this is 20% of the total enrollees through the FFM in this age group.
  - Nearly 1 out of 3 (30% or 125,707) of the 421,941 persons who selected a SADP through the FFM are young adults (ages 18-34).
  - About 1 out of 4 (25% or 105,283) of the 421,941 persons who selected a SADP through the FFM were in the pre-retirement age group (55 to 64).
  - The largest state enrollments in SADP, – more than 60,000 each, come from Florida and Texas, both states with high uninsured populations. Georgia and Pennsylvania had – more than 30,000 each in separate dental coverage; while Michigan, Illinois and Virginia had – more than 20,000 apiece. Alaska, North Dakota, South Dakota and Wyoming all had less than 1000 stand-alone dental enrollees.
  - About 55.6% (234,543) of those selecting a SADP were female; the rest were male (187,392).
  - No financial assistance*1 was provided directly to the dental plan for any of the separate dental benefit purchases.

- Number of persons who have had a Medicaid/CHIP determination or assessment through the Marketplaces: 3.2 million (does not include individuals applying through State Medicaid/CHIP agencies.). Two million of these were through the state run Marketplaces, while 1.2 million were through the FFM states. NOTE: No age related breakdown of Medicaid/CHIP enrollment was released so additional pediatric dental coverage could not be determined.

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1 Financial assistance would only apply to the pediatric dental portion of any stand-alone dental premium. Financial assistance is first paid to medical plans under HHS rules, with any remainder going to a selected dental plan. As only a portion of the cost of medical coverage is subsidized, no financial assistance is available for stand-alone dental. In some states where pediatric dental is included in the benchmark plan used to calculate the level of subsidy, the value of pediatric dental was included in all subsidies—whether or not pediatric dental was purchased or any child was enrolled under that coverage. For more information on financial assistance in Marketplaces and stand-alone dental see the NADP Briefing Paper: Dental & Tax Credits within ACA.