

## OVERVIEW

Access to dental care remains a critical issue in New Hampshire and Vermont, consistently emerging as a top concern in Upper Valley community health needs assessments. Data indicates that Medicaid-enrolled individuals in these states face significant barriers to dental services, with low provider participation and limited coverage historically restricting access. While recent policy changes have expanded benefits, many patients still struggle to receive necessary care. Addressing this issue requires policy action to further increase reimbursement rates, expand provider participation, and improve patient outreach. We ask policymakers to support legislative efforts that enhance Medicaid dental benefits, incentivize provider participation, and ensure equitable access to oral health care for all residents.

## FACTS AND FIGURES

### Vermont

- Effective July 1, 2023, Vermont increased Medicaid reimbursement rates for dental services to 75% of regional commercial rates, resulting in an approximate 50% increase ([link](#))
- Concurrently, the adult annual cap on dental expenditures was raised to \$1,500
- 96% of primary care dentists in Vermont were accepting new non-Medicaid patients, but only 60% were accepting new Medicaid patients in 2017 ([link](#))

### New Hampshire

- Of nearly 970 dentists and oral surgeons in the state, only 163 participate in the Medicaid program (~17%). ([link](#))
- The New Hampshire Smiles Program for Medicaid eligible adults covers various dental services, including examinations, cleanings, fillings, gum treatments, extractions, and dentures. However, there is a \$1,500 annual limit on dental services, excluding preventive services, which is often not sufficient for a population with sometimes severe dental care needs. ([link](#))

## POLICY TAKEAWAYS

- **Enhanced Reimbursement Rates:** Increasing Medicaid reimbursement rates can incentivize more dental providers to accept Medicaid patients, thereby expanding access. Vermont's recent adjustment to 75% of regional commercial rates exemplifies this approach.
- **Comprehensive Adult Coverage:** Implementing comprehensive dental benefits for adults as seen with New Hampshire's Smiles Adult Program, addresses a critical gap in Medicaid services and promotes better oral health outcomes.
- **Provider Participation:** Encouraging dentist participation in Medicaid is essential. Nationally participation varies, with lower rates among general dentists compared to pediatric dentists.
- **Monitoring Utilization Rates:** Despite coverage, utilization rates remain suboptimal. National data indicates that nearly half of children and only one-fifth of adults enrolled in Medicaid or CHIP receive dental services annually.

## CONCLUSION

The persistent lack of access to dental care for Medicaid recipients in New Hampshire and Vermont underscores the urgent need for policy action to expand provider participation and improve service availability. While Vermont has enhanced its Medicaid dental benefits and reimbursement rates, New Hampshire continues to face challenges in recruiting providers willing to accept Medicaid patients. Moving forward, both states must adopt collaborative and evidence-based strategies to increase provider participation, invest in workforce development, and ensure that Medicaid beneficiaries can access essential dental services without undue barriers.

## CURRENT LEGISLATIVE EFFORTS

### NEW HAMPSHIRE

- The introduction of the New Hampshire Smiles Adult Program on April 1, 2023, marked a significant policy shift, providing comprehensive dental coverage to Medicaid-enrolled adults. ([link](#))
  - There is a \$1500 limit, however, on dental services annually.

### VERMONT

- In 2019, [Act 72](#) led to the formation of a working group to evaluate Medicaid dental reimbursement rates and explore access expansion. Recommendations included rate increases and the elimination of co-payments. ([link](#))



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## METHODOLOGY

In the fall of 2024, the Public Health Council of the Upper Valley hosted a legislative event to engage policymakers and subject matter experts in discussion of key health issues in the area. Following the event, participants were asked to prioritize policy issues for further exploration. Additional conversations with experts in children's behavioral health further informed the development of this summary.

We also collaborated with local statewide advocacy groups and public health organizations in the Upper Valley to gain insights into community needs and current gaps in services. By synthesizing this information and consulting with stakeholders, we developed an overview of legislative efforts aimed at expanding access to dental care for Medicaid beneficiaries in the Upper Valley.

## REFERENCES

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