



PRESS RELEASE

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2021 MINNESOTA LEGISLATURE MAKES HISTORY PASSES HISTORIC DENTAL PACKAGE

October 20, 2021 (Zoom virtual event) — A diverse group of dental health and state leaders from across Minnesota celebrated a historic package of dental legislation passed with bipartisan support in 2021 that takes steps to bridge Minnesota’s longstanding dental divide. Acknowledging that oral health and overall health are inextricably linked, immediate and ongoing work has been set in motion to remedy Minnesota’s dental health inequities not fully addressed in 30 years.

The virtual event included Sen. Michelle Benson (R-Ham Lake), Representative Tina Liebling (DFL-Rochester), Department of Human Services Commissioner Jodi Harpstead, Dr. Sheila Riggs of the University of Minnesota School of Dentistry, and others who spoke from their experience about what the legislative package means to Minnesota.

This legislation addresses long held concern that the rates paid to dentists are too low and too varied. Over 4 years, \$61M will be used to increase the rates, which are currently from 1989, and reduce variation in what dentists are paid. Simplifying reimbursement is part of the legislature’s call for transparency and accountability in public programs.

Low-income Minnesotans enrolled in Medical Assistance and MinnesotaCare have historically experienced higher rates of dental disease and greater difficulty accessing dental services than Minnesotans with private insurance. The 2021 omnibus health and human services bill includes multiple approaches to address these complex disparities.

- It restores coverage of dental treatment for periodontal disease for adults. Periodontal disease has been linked to chronic health conditions such as diabetes, heart disease and even dementia. Research shows that treatment results in thousands of dollars in savings on medical care.

- It pays dental providers a fairer rate for their work. Low dental reimbursement rates set more than 30 years ago meant many dental clinics couldn't afford to serve Minnesotans on state health care programs.
- It simplifies the payment structure by paying all dentists the same rates for the same services in both Medical Assistance and MinnesotaCare. Equalizing payment rates removes payment disparities among dental providers.
- It reduces administrative burdens for dental providers, requiring a uniform credentialing process across all managed care plans to reduce the burden and costs associated with multiple credentialing requirements.
- It sets benchmarks for managed care plans under which at least 55% of publicly insured children and adults attributed to them receive at least one dental visit during the coverage year.
- It requires the Minnesota Commissioner of Human Services to review Medicaid dental program delivery systems in other states and analyze dental provider hesitancy to enroll in Medicaid with the goal of increasing the provider network and availability of timely, local dental care, as well as reducing emergency department usage, a common last resort for access.
- It requires the Dental Services Advisory Committee, in collaboration with specified stakeholders, to design a dental home demonstration project. Dental homes offer patients ongoing access to high quality, patient-centered, comprehensive, and coordinated oral health services, helping link them to dental specialists when appropriate and integrate with their health homes across their lifespan. National and local experts understand that a dental home should be established no later than 12 months of age to help children and their families institute a lifetime of good oral health.
- It requires the Commissioner to submit annual reports to the Legislature on dental utilization by adults and children.

A diverse group of dental professionals and advocates worked in partnership with 3M's Government Affairs Leadership and 3M Health Care's Oral Care Team to develop a white paper titled [Minnesota Leads the Nation in Dental Health Disparities: Medicaid Dental Providers Have the Answers](#). The white paper was a culmination of nearly two years of consensus-building meetings. With nearly two dozen organizations signed on as supporters, the white paper was key to the successful legislative package.

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