

Comments and Responses on ARC 8112B  
Addition of *hawk-i* Dental-Only Coverage  
Received September 29, 2009

The following persons and organizations provided written comments, which are included in the summary below:

Rebecca A Brommel, representing the Iowa Dental Association, Des Moines  
Suzanne Heckenlaible, community and government relations director, Delta Dental of Iowa, Ankeny

**Location of Dentist**

COMMENT: As a dental carrier for the HAWK-I program, there have been circumstances where HAWK-I members received care from out-of-state dentists whether that be based on geography and/or emergency. Delta Dental of Iowa respectfully requests the wording “in Iowa” be deleted in the definition of “Dentist.” (Heckenlaible)

RESPONSE: Your recommendation to delete “in Iowa” in the definition of a dentist will be incorporated into the rules that will be presented to the *hawk-i* Board on October 19, 2009.

**Medical Plan Coverage**

COMMENT: ...the addition of the “dental only” coverage option that was allowed by the Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) does not and should not change the benefits required to be provided by participating plans for children receiving general *hawk-i* coverage. Simply because a dental-only option is now allowed does not mean that the plans providing general health coverage should not be required to provide coverage for dental services. (Brommel)

RESPONSE: CHIPRA mandates that states provide dental coverage, but CHIPRA does not dictate how states must provide such coverage. The proposed rules comply with the CHIPRA obligations and allow for increased competition by allowing dental-only and medical-only plans to enter the *hawk-i* market directly. This ultimately should afford *hawk-i* enrollees a broader range of coverage options and hopefully will lead to lower costs to the Department as competition for enrollees increases.

**Separation of Medical and Dental Coverage Descriptions**

COMMENT: ...by separating the available plans into “medical” and “dental”, the revised rules will reduce the number of plans available for dental coverage. If a participating health plan does not have to provide dental services, it is clear that they will not do so...the IDA requests that the Department retain the entry for ‘dental services (including restorative and preventative services)’ in the list of minimum services that a participating health plan shall cover.” (Brommel)

RESPONSE: The intent of the legislature in the design of the *hawk-i* program has always been to promote choice and competition among participating plans. It is believed that allowing dental-only plans permits greater competition because health plans that do not offer dental coverage can now enter the market, whereas mandating health plans to provide dental coverage would drive such dental-only plans away.

The rules do not prohibit a health plan from also offering dental coverage if they choose. The rules are being amended to clarify that the requirements of participation in the *hawk-i* program apply to both health and dental plans. As currently written, the rules do not specifically address dental plans.

As background, please note that the original legislation authorizing the *hawk-i* program mandated that dental benefits be included as part of the benefit package. However, the legislation permitted the Department to contract only with health plans for the provision of services to *hawk-i* enrollees.

This was problematic for health plans because they did not traditionally provide dental benefits. As a result, they either subcontracted for dental services or attempted to provide dental benefits themselves, with varying degrees of success. John Deere (now AmeriChoice) subcontracted with Delta Dental of Iowa while Wellmark subcontracted with their Blue Dental plan. However, Iowa Health Solutions attempted to develop a dental network on their own. All of these arrangements were administratively cumbersome for the health plans and increased costs.

IDA member, Dr. Rhys Jones of Cedar Rapids repeatedly brought his concerns about Iowa Health Solutions' dental access and provider reimbursement rates to the *hawk-i* Board.

In 2003, House Amendment 1312 to HF 667 amended Chapter 514I.4(2) of the Code of Iowa to permit the Department to contract directly with dental plans for the provision of dental services. At that time, the legislation was supported by the IDA, Dr. Jones and others. As a result, any plan - whether a health plan that offers dental services or a dental-only plan - can participate with the *hawk-i* program if the plan has an adequate provider network and is willing to accept the capitation rates offered by the Department.

In October 2003, Delta Dental of Iowa approached the Department and the *hawk-i* Board to express their interest in providing dental benefits to *hawk-i* enrollees. Before making a decision, the Board asked the Clinical Advisory Committee, which included Dr. Jones, to consider the request and report back. The issue was discussed thoroughly at the subsequent seven Board meetings (December 2003 – August 2004).

In addition to the Clinical Advisory Committee, the Board received input from other dentists, Dr. Peter Damiano of the University of Iowa Public Policy Center, and the health plans before authorizing the Department to enter into a contract with Delta Dental. In general, it was believed that by doing so, access to services would be greatly improved for *hawk-i* enrollees because of the higher reimbursement rates and high participation rates of dentists in the Delta Dental network.

The Code of Iowa identifies the benefits that have to be provided, specifies that the Department must contract with plans to provide those benefits, but permits the Department to contract with dental plans to provide dental benefits. Nothing in the law specifically requires health plans to provide dental coverage. As you can see, the decision to allow dental-only plans to participate in the program was not made lightly and the amendments to these rules merely clarify the responsibilities of a dental-only plan as legislated.