

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.03.09 - MEDICAID BASIC PLAN BENEFITS

DOCKET NO. 16-0309-1802

NOTICE OF RULEMAKING - ADOPTION OF PENDING RULE AND AMENDMENT TO TEMPORARY RULE

EFFECTIVE DATE: The effective date of the amendment to the temporary rule is [July 1, 2018](#). This pending rule has been adopted by the agency and is now pending review by the [2019](#) Idaho State Legislature for final approval. The pending rule becomes final and effective at the conclusion of the legislative session, [Sine Die](#), unless the rule is approved or rejected in part by concurrent resolution in accordance with Section 67-5224 and 67-5291, Idaho Code. If the pending rule is approved or rejected in part by concurrent resolution, the rule becomes final and effective upon adoption of the concurrent resolution or upon the date specified in the concurrent resolution.

AUTHORITY: In compliance with Section 67-5224 and 67-5226, Idaho Code, notice is hereby given that this agency has adopted a pending rule and amended a temporary rule. The action is authorized pursuant to Section(s) [56-202](#), [56-264](#), and [56-1610](#), Idaho Code, and Titles XIX and XXI of the Social Security Act and Title 56, Chapter 1, Idaho Code.

DESCRIPTIVE SUMMARY: The following is a concise explanatory statement of the reasons for adopting the pending rule and amending the temporary rule and a statement of any change between the text of the proposed rule and the text of the pending rule with an explanation of the reasons for the change.

[Idaho Medicaid was directed during the 2018 session of the Idaho Legislature by passage of House Bill 465 to implement comprehensive dental benefits to all Idaho Medicaid participants.](#)

Pursuant to Section 67-5228, Idaho Code, typographical, transcriptional, and/or clerical corrections have been made to the rule and are being published with this Notice of Rulemaking as part of the pending rule.

The text of the pending rule has been amended in accordance with Section 67-5227, Idaho Code, and is being republished following this notice. Rather than keep the temporary rule as previously adopted while the pending rule awaits legislative approval, the [Department](#) amended the temporary rule with the same revisions made to the pending rule. Only the sections that differ from the proposed rule text are printed in this Bulletin. The original text of the temporary and proposed rule was published in the [July 4, 2018](#) Idaho Administrative Bulletin, Vol. [18-7](#), pages [93-99](#).

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

[There is an expected increase in General Fund expenditures of \\$3.8 million. Medicaid will leverage the current Federal matching rate for the Idaho Medicaid program in addition to the anticipated future offset to the general fund of \\$2.5 million from a reduction in emergency dental costs and treatment costs for other medical conditions complicated by lack of access to oral health care for these Medicaid participants. The system changes needed for this project are minimal and can be incorporated into existing operations.](#)

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the pending rule and the amendment to temporary rule, contact [Cindy Brock, \(208\) 364-1983](#).

DATED this _____ day of _____, 2018.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
P.O. Box 83720
Boise, ID 83720-0036

(208) 334-5500 phone; (208) 334-6558 fax
dhwrules@dhw.idaho.gov e-mail

THE FOLLOWING IS THE TEMPORARY AND PROPOSED TEXT OF DOCKET NO. 16-0309-1802

(Only Those Sections With Amendments Are Shown.)

803. DENTAL SERVICES: COVERAGE AND LIMITATIONS.

Some covered dental services may be subject to limitations, require authorization from the Idaho Smiles contractor or benefit restrictions according to the terms of its contract with the Department, in addition to those specified in these rules. ~~(3-29-12)~~(7-1-18)T

01. Dental Coverage for Children. Children are covered for dental services that include: ~~(3-29-12)~~

~~a-~~ Preventative ~~and~~ screenings, problem-focused and comprehensive exams, diagnostic, restorative, endodontic services (including root canals and crowns), periodontics, prosthodontic, ~~and~~ orthodontic treatments, dentures, ~~crowns~~ and oral surgery; ~~(3-29-12)~~(7-1-18)T(7-1-18)T

~~b-~~ Other dental services that are determined medically necessary by the Department, as required by the Early and Periodic Screening and Diagnostic Testing (EPSDT) guidelines specified in Section 1905(r) of the Social Security Act, are also covered. ~~(3-29-12)~~

02. ~~Children's Orthodontics~~ Dental Limitations for Children. Orthodontics are limited to children who meet the ~~Basic Plan Medicaid~~ eligibility requirements, and the Idaho Medicaid Handicapping Malocclusion Index as evaluated determined by the state Medicaid dental consultant and the dental insurance ~~State's~~ contractor's dental consultant. The Malocclusion Index is found in Appendix A of these rules. ~~(3-29-12)~~(7-1-18)T(7-1-18)T

03. Dental Coverage ~~and Limitations~~ for Adults. ~~Adults who are not pregnant are limited to the dental services coverage using the Current Dental Terminology (CDT) codes listed in the following table~~ Adults are covered for dental services that include: ~~(3-29-12)~~(7-1-18)T

~~a-~~ Preventative screenings, problem-focused and comprehensive exams, diagnostic, restorative, periodontics, prosthodontic, dentures, oral surgery, and endodontic services with limitations, periodontics, prosthodontic, dentures, and oral surgery. ~~(7-1-18)T~~(7-1-18)T

~~b-~~ Root canals and crowns are not covered. ~~(7-1-18)T~~

054. ~~Benefit~~ Dental Limitations for Adults. The dental insurance contractor may establish limitations and restrictions for benefits according to the terms of its contract with the Department, in addition to those specified in this rule Root canals and crowns are not covered. ~~(3-29-12)~~(7-1-18)T(7-1-18)T