



# ISSUE Brief

## Children's Dental Coverage: Providing Families with Enhanced Coverage Choices

### TWEETS

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🐦 Families need greater choice and stability when it comes to pediatric dental benefits

🐦 AHIP Issue Brief: Providing children's dental coverage to best meet families' needs  
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## KEY TAKEAWAYS



**The Affordable Care Act (ACA)**

includes pediatric dental benefits as one of the essential health benefits.



**When families are shopping for health**

and dental insurance outside of the Exchange, they face greater uncertainty about their coverage choices and options.



**Aligning insurance markets will provide**

greater choice and stability for families, whether they choose to purchase coverage on or outside of the Exchange.



**An estimated 8.7 million children**

will receive dental coverage by 2018 due to the coverage expansions under the ACA.

## Background

The Affordable Care Act (ACA) requires coverage offered in the individual and small group markets to provide essential health benefits, including pediatric oral health benefits. The inclusion of dental benefits for children builds on the roughly 42 million children who had dental coverage through private health plans — both through employer and individual market coverage — in 2010.<sup>1</sup> An analysis found that an estimated 8.7 million children will receive dental coverage by 2018 due to the coverage expansions under the ACA.<sup>2</sup>

When the U.S. Department of Health and Human Services (HHS) created rules for how the pediatric dental benefit would be offered, it permitted the benefit to be sold by stand-alone dental plans or as a part of a major medical health plan. However, a provision in the ACA complicates how families choose the coverage that best meets their needs when purchasing coverage outside of the Exchange.

## Dental Plan Market Rules Lead to More Confusion and Less Choice for Families

Currently, the ACA allows a family shopping in the Exchange to purchase health and dental benefits in two ways:

1. A family can select a major medical health plan, or Qualified Health Plan (QHP), that includes the pediatric dental benefit, or
2. A family may select a stand-alone dental plan that provides the pediatric dental benefit and a QHP that excludes that benefit. The second option is only available in Exchanges where stand-alone dental plans are offered.

Families are not offered these coverage options when shopping for coverage outside of the Exchange. Instead, health plans in these markets must either offer coverage that includes pediatric dental benefits or, as noted by HHS, be “reasonably assured” that this coverage has been purchased elsewhere.<sup>3</sup> This ambiguity in the regulation and the ACA has resulted in consumer confusion where two distinct markets have different standards—one inside and one outside the Exchange. Families should be given the same option regardless of the market chosen to purchase coverage.

## Recommendation

Congress should pass bipartisan legislation (H.R. 3463), the “Aligning Children’s Dental Coverage Act”, which would make a necessary change to the essential health benefits provision of the ACA that levels the playing field inside and outside of the Exchange. Aligning these markets will give families more choice and less confusion when selecting benefits, encourage competition, and allow families to purchase dental coverage, including pediatric benefits, through a stand-alone dental plan that meets their specific needs.

## End Notes

- 1 U.S. Government Accountability Office, Report to the Chairman, Subcommittee on Primary Health and Aging, Committee on Health, Education, Labor, and Pensions, U.S. Senate, “Dental Services, Information on Coverage, Payments, and Fee Variation”, September 2013, <http://www.gao.gov/assets/660/657454.pdf>
- 2 Nasseh, Kamyar, et. al., “Affordable Care Act Expands Dental Benefits for Children But Does Not Address Critical Access to Dental Care Issues,” American Dental Association Research Brief, April 2013, [http://www.ada.org/~media/ADA/Science%20and%20Research/Files/HPRCBrief\\_0413\\_3.ashx](http://www.ada.org/~media/ADA/Science%20and%20Research/Files/HPRCBrief_0413_3.ashx)
- 3 Federal Register, Vol. 78, No. 37, pg. 12853.

## Related Topic

A Consumer Guide to Understanding Health Plan Networks, AHIP Foundation



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