

**SENATE
STATE OF MINNESOTA
NINETY-FIRST SESSION**

S.F. No. 3352

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DATE	D-PG	OFFICIAL STATUS
02/20/2020	4836	Introduction and first reading Referred to Health and Human Services Finance and Policy

1.1 A bill for an act

1.2 relating to health care; expanding medical assistance coverage for adult dental

1.3 services; amending Minnesota Statutes 2018, section 256B.0625, subdivision 9.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2018, section 256B.0625, subdivision 9, is amended to read:

1.6 Subd. 9. **Dental services.** (a) Medical assistance covers medically necessary dental

1.7 services.

1.8 ~~(b) Medical assistance dental coverage for nonpregnant adults is limited to the following~~

1.9 ~~services:~~

1.10 ~~(1) comprehensive exams, limited to once every five years;~~

1.11 ~~(2) periodic exams, limited to one per year;~~

1.12 ~~(3) limited exams;~~

1.13 ~~(4) bitewing x-rays, limited to one per year;~~

1.14 ~~(5) periapical x-rays;~~

1.15 ~~(6) panoramic x-rays, limited to one every five years except (1) when medically necessary~~

1.16 ~~for the diagnosis and follow-up of oral and maxillofacial pathology and trauma or (2) once~~

1.17 ~~every two years for patients who cannot cooperate for intraoral film due to a developmental~~

1.18 ~~disability or medical condition that does not allow for intraoral film placement;~~

1.19 ~~(7) prophylaxis, limited to one per year;~~

1.20 ~~(8) application of fluoride varnish, limited to one per year;~~

- 2.1 ~~(9) posterior fillings, all at the amalgam rate;~~
 2.2 ~~(10) anterior fillings;~~
 2.3 ~~(11) endodontics, limited to root canals on the anterior and premolars only;~~
 2.4 ~~(12) removable prostheses, each dental arch limited to one every six years;~~
 2.5 ~~(13) oral surgery, limited to extractions, biopsies, and incision and drainage of abscesses;~~
 2.6 ~~(14) palliative treatment and sedative fillings for relief of pain; and~~
 2.7 ~~(15) full-mouth debridement, limited to one every five years.~~

2.8 ~~(e) In addition to the services specified in paragraph (b), medical assistance covers the~~
 2.9 ~~following services for adults, if provided in an outpatient hospital setting or freestanding~~
 2.10 ~~ambulatory surgical center as part of outpatient dental surgery:~~

- 2.11 ~~(1) periodontics, limited to periodontal scaling and root planing once every two years;~~
 2.12 ~~(2) general anesthesia; and~~
 2.13 ~~(3) full-mouth survey once every five years.~~

2.14 ~~(d) Medical assistance covers medically necessary dental services for children and~~
 2.15 ~~pregnant women. The following guidelines apply:~~

- 2.16 (1) posterior fillings are paid at the amalgam rate;
 2.17 (2) application of sealants are covered once every five years per permanent molar for
 2.18 children only;
 2.19 (3) application of fluoride varnish is covered once every six months; and
 2.20 (4) orthodontia is eligible for coverage for children only.

2.21 ~~(e) (b)~~ In addition to the services specified in ~~paragraphs (b) and (e)~~ paragraph (a),
 2.22 medical assistance covers the following services for adults:

- 2.23 (1) house calls or extended care facility calls for on-site delivery of covered services;
 2.24 (2) behavioral management when additional staff time is required to accommodate
 2.25 behavioral challenges and sedation is not used;

2.26 (3) oral or IV sedation, if the covered dental service cannot be performed safely without
 2.27 it or would otherwise require the service to be performed under general anesthesia in a
 2.28 hospital or surgical center; and

3.1 (4) prophylaxis, in accordance with an appropriate individualized treatment plan, but
3.2 no more than four times per year.

3.3 ~~(f)~~ (c) The commissioner ~~shall~~ must not require prior authorization for the services
3.4 included in paragraph ~~(e)~~ (b), clauses (1) to (3), and ~~shall~~ must prohibit managed care and
3.5 county-based purchasing plans from requiring prior authorization for the services included
3.6 in paragraph ~~(e)~~ (b), clauses (1) to (3), when provided under sections 256B.69, 256B.692,
3.7 and 256L.12.