



Issuers of Stand-alone Dental Plans: Intent to Offer in FFE States

HHS is releasing the attached table that lists the number of issuers that intend to offer stand-alone dental plans (SADPs) in states that are expected to have a Federally-facilitated Exchange (FFE), including State Partnership Exchanges, based on the current Exchange Blueprint Approvals.

The Affordable Care Act permits an SADP to participate in an Exchange if the plan provides the pediatric dental benefits that the Secretary has defined as part of the essential health benefits (EHB).¹ The Affordable Care Act also permits a health plan that does not provide the pediatric dental EHB to be certified as a qualified health plan (QHP) eligible for Exchange participation so long as such Exchange offers at least one SADP.²

In order to allow QHP issuers to exercise the statutory option to omit the pediatric dental EHB, CCIIO established a voluntary reporting process for dental issuers to communicate their intent to offer pediatric dental EHB through SADPs in Exchanges by state, market (individual or group), and service area by county (and zip code if partial counties). The voluntary reporting program was established in the *EHB Data Collection Final Rule*, published on July 20, 2012,³ and the reporting data elements were included in an associated Information Collection Request.⁴

Although the voluntary reporting program is not legally binding, we encouraged SADP issuers only to indicate a serious intent to offer in an Exchange because QHP issuers will design plans based on this report. In order to formally offer coverage through the Exchange, SADP issuers will need to submit and receive certification for their plans.

The following charts contain the results of the voluntary reporting exercise. The numbers represent the number of issuers that intend to offer SADPs: 1) in the individual and small group markets statewide; 2) statewide, but only in the individual market; and, 3) statewide, but only in the small group market. We received some responses that indicated participation in part of a state, but did not include those in this count.

Given that there are at least 3 issuers planning to offer SADPs in both markets statewide, we believe that HHS can reasonably expect there to be sufficient SADP coverage to permit QHPs in the FFE in these states to omit the pediatric dental EHB if they choose to do so.

¹ Section 1311(d)(2)(B)(ii) of the Affordable Care Act.

² Section 1302(b)(4)(F) of the Affordable Care Act.

³ [CMS-9965-F: Data Collection to Support Standards Related to Essential Health Benefits; Recognition of Entities for the Accreditation of Qualified Health Plans](#) (Jul. 18, 2012).

⁴ [CMS-10448: Notice of Intent to Provide Dental Coverage in the Exchange](#).

Number of Dental Issuers Intending to Offer SADPs Statewide in the Individual and Small Group Markets	
Alabama	5
Alaska	3
Arizona	8
Arkansas	3
Delaware	3
Florida	8
Georgia	8
Illinois	5
Indiana	5
Iowa	3
Kansas	5
Louisiana	7
Maine	4
Michigan	6
Mississippi	4
Missouri	5
Montana	4
Nebraska	6
New Hampshire	4
New Jersey	4
North Carolina	6
North Dakota	4
Ohio	6
Oklahoma	4
Pennsylvania	6
South Carolina	5
South Dakota	5
Tennessee	4
Texas	8
Virginia	9
West Virginia	4
Wisconsin	7
Wyoming	5

Number of Dental Issuers Intending to Offer SADPs Statewide in the <u>Individual Market Only</u>	
Arizona	1
Florida	1
Georgia	1
North Carolina	1
South Carolina	1
Tennessee	1
Texas	1

Number of Dental Issuers Intending to Offer SADPs Statewide in the <u>Small Group Market Only</u>	
Florida	1
Georgia	1
Illinois	1
Indiana	1
New Jersey	1
North Carolina	1
Texas	1