

Appendix 3: Dental Care under the Affordable Care Act

The Affordable Care Act, also known as the ACA, is the landmark health reform legislation that became law in March 2010. The ACA includes a long list of essential health benefits that began taking effect in 2010. Key provisions will offer coverage to millions of uninsured Americans, to implement measures that will lower health care costs and improve system efficiency, and to eliminate industry practices that include rescission and denial of coverage due to pre-existing conditions.¹ The 10 essential health benefits include outpatient care, emergency room visits, inpatient care treatment, mental health/substance abuse services, prescription drugs, service for injury/disability/chronic condition, lab tests, preventive services, and pediatric services (including dental and vision care).²

Under the Affordable Care Act, dental insurance is not mandated for adults. Adults can buy a dental plan through the Federal Marketplace when enrolling in a health plan. Otherwise, a stand-alone dental plan for adults through ACA can be obtainable.³ Private dental plans can be found on and off the Marketplace. In 2016, dental plans available through the marketplace include: Delta Dental of Delaware, Inc. (individual and small group), Dentegra Dental of DE Inc. (individual and small group), and Dominion Dental Services, Inc. (individual and small group), and Guardian (small group only).

Under the individual, small business, or exchange plan, children (up to age 19) can be covered for dental insurance.⁴ Since Delaware is a part of the Federal Marketplace, pediatric dental coverage has to be available to the underage residents in the state. Therefore, Delaware has 13 out of the 21 plans that are offered on the Marketplace to include pediatric coverage and 12 stand-alone dental plans. For further clarification, pediatric dental plans have to be available to people for use, but people are not required to buy the pediatric dental plan. For families, people do not have to buy the coverage if it's offered as a separate plan, but families should have the option for a general health plan with pediatric dental coverage.³

References

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4. Medicaid and CHIP Payment and Access Commission (2015). Report to Congress on Medicaid and CHIP. Retrieved from <https://www.macpac.gov/wp-content/uploads/2015/06/June-2015-Report-to-Congress-on-Medicaid-and-CHIP.pdf>