Implementing a group dental plan for ADAP clients
Louisiana Health Access Program

- LA HAP is Louisiana’s ADAP
- Covers health premiums and cost-shares for insured clients
  - LA HAP office manages ADAP enrollment and eligibility
  - Contracts with local community-based organization, HAART Inc., to process premium and cost-share payments
  - Clients do NOT need to work with case management in order to access LA HAP
- Approximately 3,500 clients at any given time, of which ~90% are insured
  - 1/3 Marketplace
  - 1/3 Employer/group
  - 1/3 Medicare
Why should ADAPs prioritize dental care?

- In 2017 Statewide Needs Assessment for PLWH (N=1,364):
  - 26% lack dental coverage, but need it
  - 6.3% have coverage that doesn’t meet all their needs
  - 8.4% have it but aren’t sure how to use it
- Adult dental insurance is NOT subject to regulation under the ACA
  - Waiting periods often apply
  - Small annual coverage limits (e.g. $1,500)
  - Out-of-pocket maximums are rare
  - Many necessary services are not covered

2018 survey of trans and gender-nonconforming New Orleanians: dental care was #1 top concern with 80% reporting need
What we tried before

• 2016: HRSA clarifies rules around standalone dental coverage
  • Allowed for coverage of certain services within waiting periods, above annual maximum, outside Schedule of Benefits, etc. if considered medically necessary

• Problems encountered:
  • For clients/case managers: new policies not well-publicized, understood or utilized
  • For dental providers: new policies lacked clear, cut-and-dry answers on what they would be reimbursed for
  • LA HAP/HAART staff: placed in position of judging claims based on medical necessity; staff had few tools available to push back against providers believed to be taking advantage of generous reimbursement policies
Creation of the LA HAP/Guardian Plan

• 2018: Approached by American Exchange brokers about creation of group plan for LA HAP clients
  • AE connected LA HAP with Guardian Life Insurance to customize a private plan where the ADAP acts as an “employer” and plan administrator
  • HAART, Inc. (sub-contractor) entered into the contract with Guardian in order to avoid state procurement process

• Guardian conducted provider network analysis
  • 4,824 statewide providers
  • 96.2% of LA HAP clients live within 10 miles of a network provider
    • 95% live within 10 miles of 2 or more providers
    • Among “key geographic areas” (17 parishes with largest concentration of LA HAP clients): 97.3% have provider access

• Went live in January 2019
Customized plan design

- Consulted with local FQHC dental clinic on which services should be included & which common plan clauses should be eliminated in order to better serve PLWH
- 100% coverage without cost-sharing at time of in-network visit for all covered services
- No waiting period
- Annual maximum set at $5,000
Plan enrollment

- Can opt into plan at time of LA HAP recertification, or can enroll anytime by completing simple enrollment form
- Year-round enrollment
- LA HAP and HAART staff have access to Guardian online portal to directly enroll, disenroll clients in near-real time
- Clients who fail to recertify for LA HAP are manually disenrolled from Guardian at the end of each month (but can opt back in once recertified)
Guardian plan utilization

LA HAP/Guardian Dental Plan Enrollment Over Time

Dec-18 | 590
Jan-19 | 925
Feb-19 | 1,234
Mar-19 | 1,411
Apr-19 | 1,617
May-19 | 1,726
Jun-19 | 1,814
Jul-19 | 1,886
Aug-19 | 1,939
Sep-19 | 1,974
Oct-19 | 2,018
Nov-19 | 2,067

Added
Disenrolled
Net Enrollment
Guardian plan expenditures

LA HAP/Guardian Dental Plan Expenditures Over Time

Total expenditures so far in 2019: $1,058,777
In 2018: refers to enrollment in individual, non-employer dental plan. In 2019: refers to enrollment in Guardian dental plan (LA HAP discontinued coverage of all other individual, non-employer options in 2019).

** Reflects data for Jan-Sept 2019 only (most recent available). 2018 data reflects full year.

- Utilization of individual dental coverage:
  - Enrolled only
  - Enrolled & utilized plan

- Average annual claim expenditures per client:
  - 2018: $939
  - 2019: $1,195

- Average annual premium expenditures per client:
  - 2018: $476
  - 2019: $84

*In 2018: refers to enrollment in individual, non-employer dental plan. In 2019: refers to enrollment in Guardian dental plan (LA HAP discontinued coverage of all other individual, non-employer options in 2019).
## What we’ve learned

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<th>The Good</th>
<th>The Growing</th>
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| - Large insurers have resources, areas of expertise and professionalized data systems beyond the capacity of most ADAPs, including:  
  - 3rd party verification for coordination of benefits  
  - Professional panels to review claims and appeals  
  - Customized utilization analyses  
  - Designing a standalone plan with 0% cost-sharing levels means members don’t need to let providers know about their ADAP coverage  
  - Members have great freedom in choosing providers | - Dentists can still:  
  - Balance-bill  
  - Refuse to accept any insurance  
  - Require an upfront deposit from member, even for a plan with 100% coverage  
  - Insurers and brokers must be introduced to the concept, structure and values of ADAP  
  - No plan design can account for all costs a client might incur or procedures they might be offered |
Thank you!

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