



SPONSOR: Sen. S. McBride & Rep. Harris & Rep. Wilson-Anton
Sens. Gay, Hansen, Hocker, Hoffner, Huxtable, Poore,
Sokola, Walsh; Reps. Baumbach, Heffernan, Morrison,
Neal

DELAWARE STATE SENATE
152nd GENERAL ASSEMBLY

SENATE BILL NO. 204

AN ACT TO AMEND TITLE 31 OF THE DELAWARE CODE RELATING TO DENTAL CARE FOR ADULT
MEDICAID RECIPIENTS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

Section 1. Amend § 503, Title 31 of the Delaware Code by making deletions as shown by strike through and
insertions as shown by underline as follows:

§ 503. Eligibility for assistance; amount; method of payment.

(b) *Medicaid*. — (1) Medical assistance may be granted to medically and financially eligible persons in
accordance with Titles IV-A, IV-E, XVI, and XIX of the Social Security Act (42 U.S.C. §§ 601 et seq., 1381 et seq., and
1396 et seq.), federally approved waivers of these sections of the act, and rules and regulations established by the
Department of Health and Social Services. Eligibility for and payment of medical assistance must be determined under
policies and regulations established by the Department of Health and Social Services. Eligibility standards, recipient copay,
and provider reimbursement must be set in accordance with state and federal mandates, state and federal funding levels,
approved waivers, and rules and regulations established by the Department. The amount of assistance in each case of
medical care must not duplicate any other coverage or payment made or available for the costs of such health services and
supplies. To the extent permitted by federal requirements, no annual or lifetime numerical limitations may be placed on
physical therapy or chiropractic care visits that are for the purpose of treating back pain.

(2) a. ~~Except as otherwise provided in paragraph (b)(2)b. of this section, the~~ The amount of assistance
provided to an adult recipient for dental care must not exceed ~~\$1,000~~ \$2,500 per year.

b. ~~The Department may establish a review process through which extra benefit dollars, not exceeding an
additional \$1,500 per adult recipient, may be authorized on an emergency basis for dental care treatments.~~

[Repealed.]

c. All payments for dental care treatments are subject to a \$3.00 copay for adult recipients.

SYNOPSIS

Before October 1, 2020, Delaware was 1 of only 3 states that did not offer some form of adult dental coverage
through Medicaid. With the enactment of Senate Substitute No. 1 for Senate Bill 92 (150th General Assembly) (Chapter

187 of Volume 82 of the Laws of Delaware) and Senate Bill No. 237 (150th General Assembly) (Chapter 290 of Volume 82 of the Laws of Delaware), Delaware began providing dental care benefits to eligible Medicaid recipients in an amount not to exceed \$1,000 per year, with the potential for an additional \$1,500 per year for emergency care with the approval of the Department of Health and Social Services ("Department").

This Act streamlines the Medicaid Adult Dental benefit by consolidating the emergency and non-emergency benefits into a single benefit of \$2,500.

Author: Senator S. McBride