

Legislative Report

Dental Utilization Report

Health Care Administration

Healthcare Research & Quality Division

March 2023

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Minnesota Statutes, Chapter 3.197, requires the disclosure of the cost to prepare this report. The estimated cost of preparing this report is \$5,929.

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I. Executive summary

Minnesotans with lower incomes experience higher rates of foregone dental care. In the years just prior to the start of the COVID-10 pandemic, roughly 55% of Minnesotans with coverage through Medicaid did not see a dentist, and the utilization rates of preventative dental services was even lower in 2020.

The 2021 legislature made changes to improve the rate method and increase base rates for dental services. This rate change in combination with continued efforts by DHS, payers and providers to increase access to dental services is expected to raise the utilization rates of dental visits. While the impact of those efforts are not yet reflected in the available data, this report provides a baseline reference to enable monitoring dental utilization rates in Minnesota Medicaid.

This DHS report provides the percentage of adults and children covered under Minnesota's fee-for-service or prepaid medical assistance program who received at least one dental visit during the 2018 through 2021 calendar years. This report contains the baseline utilization rates for those calendar years. This is the second Dental Utilization Report, and annual updates will be provided in subsequent years through 2026.

II. Legislation

The legislation that mandates the creation of this report is Minnesota Statutes 2021, section 256B.0371, subdivision 4:

- Subd. 4. Dental utilization report. (a) The commissioner shall submit an annual report beginning March 15, 2022, and ending March 15, 2026, to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services policy and finance that includes the percentage for adults and children one through 20 years of age for the most recent complete calendar year receiving at least one dental visit for both fee-for-service and the prepaid medical assistance program. The report must include:
 - (1) statewide utilization for both fee-for-service and for the prepaid medical assistance program;
 - (2) utilization by county;
- (3) utilization by children receiving dental services through fee-for-service and through a managed care plan or county-based purchasing plan;
- (4) utilization by adults receiving dental services through fee-for-service and through a managed care plan or county-based purchasing plan.
- (b) The report must also include a description of any corrective action plans required to be submitted under subdivision 2.
- (c) The initial report due on March 15, 2022, must include the utilization metrics described in paragraph (a) for each of the following calendar years: 2017, 2018, 2019, and 2020.

III. Introduction

Purpose of report

While Minnesota ranks near the top in many areas of health care, providing access to dental care is not one of them. In fact, for states reporting rates of preventative dental services for individuals covered by Medicaid, Minnesota falls below the national median. Minnesota Health Care Program enrollees represent low-income populations, including individuals with disabilities, older adults (65+ years), pregnant women, and children who may experience higher and more severe dental disease and oral conditions. Unaddressed oral health issues can lead to other chronic conditions such as mouth pain, tooth loss, and gum disease. These conditions can also impact nutrition and contribute to absenteeism.

Minnesotans with lower incomes experience higher rates of foregone dental care. Roughly 55% of Minnesotans with coverage through Medicaid did not see a dentist in 2017, 2018 and 2019. With the COVID-19 pandemic impacting access to care, utilization of preventative dental services was even lower in 2020.

The purpose of this report is to provide the baseline data for dental utilization for adults and children covered by Minnesota health care program fee-for-service and Medicaid managed care plans from 2018 to 2021. This report is submitted to the Minnesota Legislature pursuant to Minnesota Statutes 2020, section 256.01, subdivision 28. It provides a reference point for future updates which develop toward analysis around whether DHS and MN Health Plans achieve a dental access performance benchmark for the coverage years of 2022 – 2024.

The Research and Data Analysis section within the Healthcare Research and Quality division of the Health Care Administration prepared this report. The source of information used for the report was administrative claims and encounter data received at DHS.

Contents of Report

As prescribed by the legislation, the report includes statewide utilization for both fee-for-service and for the prepaid medical assistance program, broken out in the following categories:

- utilization statewide for all enrolled in Minnesota Health Care programs Table 1
- 2. utilization by county Table 2
- 3. utilization **by children** receiving dental services through fee-for-service and through a managed care plan or county-based purchasing plan Table 3

- 4. utilization **by adults** receiving dental services through fee-for-service and through a managed care plan or county-based purchasing plan Table 4
- 5. utilization **by calendar years** 2018, 2019, 2020, and 2021 Tables 1 5

IV. Report Data

A. Annual Dental Visit Measure Specifications

DHS used as a base the National Committee of Quality Assurance (NCQA) 2021 technical specifications for the Healthcare Effectiveness Data and Information Set (HEDIS®) for the Annual Dental Visit for Children. Though typically used for children in a health plan, DHS applied the same technical specifications to measure the annual dental visits for adults, and to members who had any type of full benefit coverage through a DHS program including fee-for-service.

To align with the language in the Minnesota legislation, the age range used for the children's measure was modified from the HEDIS® range of age 2-20 to age 1-20. The age range of 1-20 is consistent with age criteria used in other required state reporting to CMS under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, known as the Child and Teen Checkups program in Minnesota. Minnesota has been under corrective action from CMS for not providing sufficient access to dental services for children served by its Medicaid program.

The Annual Dental Visit measure specification requires that there be at least 11 months of enrollment with the same health plan to be eligible for inclusion in the measure. To align with the language in the Minnesota legislation, enrollees who had 11 months of continuous enrollment in a Minnesota Health Care Program were included. As a result, enrollees who did not have Medical Assistance or MinnesotaCare coverage for most of the year are not reflected in these rates. Other measures of dental utilization, such as the one used by CMS in the Child Health Care Quality Core Set reporting, may not include this criteria and are therefore not directly comparable. Ninety days of continuous enrollment is the specification used for EPSDT program reporting to CMS.

Rate Calculation

The dental utilization rate is calculated by dividing the numerator by the denominator (Rate = [N / D]) and expressed as a percentage using the definitions described below.

The denominator (D) is the number of enrollees who meet all these criteria:

The enrollee's age calculated as of December 31 of the calendar year.

Children are defined 1-20 years of age.

Adult are defined at age 21 and older.

Continuous enrollment: The enrollee had either Medicaid fee-for-service or coverage through a Medicaid managed care organization for the entire measurement year (January 1 through December Dental Utilization Report

31) with no more than a one-month gap in enrollment. Continuous enrollment in Minnesota Health Care Programs (MHCP) is defined as enrollment in Medicaid regardless of the length of time with a single managed care plan or county-based purchasing plan or fee-for-service. Where results are displayed by health plan, the managed care or county based purchasing plan that the enrollee was in as of the last month of the measurement year (December) is used.

The numerator (N) is the number of enrollees who meet the denominator criteria and had one or more dental visits with a dental practitioner during the measurement year.

A dental visit is identified by any dental procedure code on a Medicaid claim or encounter where the submitted provider is any of the following categories of dental professionals:

- A practitioner who holds a Doctor of Dental Surgery (DDS) or a Doctor of Dental Medicine (DMD) degree from an accredited school of dentistry and is licensed to practice dentistry by a state board of dental examiners;
- Certified and licensed dental hygienists
- Dental therapists and advanced dental therapists.

Data Sources

The source of information used for the report are administrative claims, encounter and eligibility data received at DHS and stored in the DHS Data Warehouse. Records received by the DHS as of May 31, 2022 were included.

B. Dental Rates Data

The statewide dental utilization rate range increased slightly between 2017 and 2019 from 44% and 45.5%, and dropped to 33.6% for calendar year 2020. The rate improved to 37.4% for 2021.

The total number of enrollees with continuous enrollment is higher in 2020 due to the maintenance of coverage provisions in the Families First Coronavirus Response Act. This Act ensured enrollees kept their coverage with limited exceptions through the federal public health emergency and were not required to go through a renewal or redetermination process. As a result, fewer enrollees lost their coverage and a greater number could be included in the 2020 assessment. However, due to social distancing precautions, temporary office closures, and other disruptions in enrollee's ability to access dental and other services due to the pandemic, overall utilization of dental services was lower.

Table 1 contains the total number of people enrolled in a Minnesota Health Care Program meeting the measure criteria in each calendar year 2018 through 2021. For each year, column 'N' denotes the number of people who received at least one dental visit in each of the calendar years 2018 through 2021, out of the total eligible number for the measure which is the 'D' denominator column.

Table 1 Statewide Dental Rates by MN Healthcare Program Enrollment for 2018 to 2021

	2018			2019			2020			2021		
	N	D	%	N	D	%	N	D	%	N	D	%
Fee-for-Service	64,732	169,572	38.2	62,572	163,765	38.2	43,059	150,417	28.6	46,977	144,911	32.4
MCO or CBP	355,549	803,317	44.3	347,726	768,361	45.3	306,578	918,746	33.4	410,651	1,096,499	37.4
All MHCP	420,281	972,889	43.2	410,298	932,126	44.0	349,637	1,069,163	32.7	457,628	1,241,410	36.9

Table 2 contains the number of people residing in each county meeting the measure criteria in each calendar year 2018 through 2021. A total across all counties is included at the bottom of the table.

Table 2 Dental Rates by County for 2018 to 2021

		2018	2019				2020		2021			
County	N	D	%	N	D	%	N	D	%	N	D	%
AITKIN	1,517	3,571	42.5	1,432	3,364	42.6	1,238	3,744	33.1	1,455	4,160	35.0
ANOKA	24,766	53,527	46.3	24,373	51,491	47.3	20,819	60,427	34.5	28,396	72,741	39.0
BECKER	3,989	7,849	50.8	3,862	7,516	51.4	3,391	8,530	39.8	4,182	9,622	43.5
BELTRAMI	5,906	12,345	47.8	5,939	12,401	47.9	4,797	14,156	33.9	5,846	15,868	36.8
BENTON	3,192	7,709	41.4	3,167	7,474	42.4	2,874	8,686	33.1	3,653	9,932	36.8
BIG STONE	528	1,013	52.1	456	1,179	38.7	404	1,241	32.6	522	1,399	37.3
BLUE EARTH	4,657	10,727	43.4	4,377	10,531	41.6	3,954	12,092	32.7	5,359	14,158	37.9
BROWN	1,756	3,890	45.1	1,747	3,753	46.5	1,606	4,180	38.4	1,732	4,738	36.6
CARLTON	2,933	6,796	43.2	2,798	6,469	43.3	2,306	7,222	31.9	3,163	8,174	38.7
CARVER	3,775	8,996	42.0	3,664	8,572	42.7	3,065	9,836	31.2	4,315	11,696	36.9
CASS	3,392	8,054	42.1	3,268	7,834	41.7	2,774	8,717	31.8	3,427	9,803	35.0
CHIPPEWA	1,272	2,700	47.1	1,237	2,632	47.0	1,132	2,921	38.8	1,238	3,317	37.3
CHISAGO	2,932	7,765	37.8	2,958	7,316	40.4	2,441	8,329	29.3	3,251	9,692	33.5
CLAY	5,165	11,776	43.9	5,530	11,795	46.9	4,506	13,050	34.5	5,789	14,851	39.0
CLEARWATER	957	2,036	47.0	968	1,978	48.9	796	2,182	36.5	972	2,475	39.3

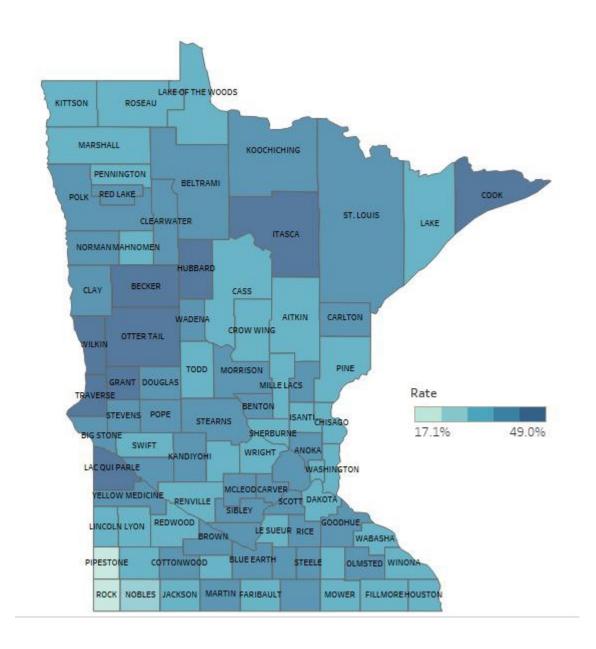
		2018			2019			2020		2021			
County	N	D	%	N	D	%	N	D	%	N	D	%	
СООК	516	1,031	50.0	545	940	58.0	436	1,049	41.6	591	1,205	49.0	
COTTONWOOD	1,120	2,648	42.3	1,075	2,564	41.9	1,003	2,862	35.0	1,190	3,269	36.4	
CROW WING	5,561	13,587	40.9	5,426	12,908	42.0	4,841	14,482	33.4	5,863	16,434	35.7	
DAKOTA	24,933	58,744	42.4	24,726	56,576	43.7	19,890	66,252	30.0	28,273	79,765	35.4	
DODGE	1,251	2,896	43.2	1,198	2,721	44.0	1,051	3,101	33.9	1,264	3,585	35.3	
DOUGLAS	2,943	5,809	50.7	2,827	5,547	51.0	2,635	6,277	42.0	3,033	7,151	42.4	
FARIBAULT	1,232	3,100	39.7	1,144	2,972	38.5	1,065	3,302	32.3	1,244	3,804	32.7	
FILLMORE	1,370	3,594	38.1	1,385	3,534	39.2	1,220	3,909	31.2	1,445	4,344	33.3	
FREEBORN	2,280	6,146	37.1	2,361	5,889	40.1	2,340	6,962	33.6	2,916	7,931	36.8	
GOODHUE	2,369	5,876	40.3	2,356	5,537	42.6	2,235	6,462	34.6	2,896	7,638	37.9	
GRANT	624	1,270	49.1	603	1,218	49.5	545	1,349	40.4	667	1,516	44.0	
HENNEPIN	97,189	221,736	43.8	95,004	211,809	44.9	78,347	245,206	32.0	107,029	286,462	37.4	
HOUSTON	900	2,474	36.4	954	2,452	38.9	849	2,600	32.7	992	3,023	32.8	
HUBBARD	2,388	4,824	49.5	2,462	4,787	51.4	2,049	5,294	38.7	2,581	5,893	43.8	
ISANTI	2,668	7,015	38.0	2,502	6,411	39.0	2,144	7,255	29.6	2,750	8,432	32.6	
ITASCA	5,138	9,780	52.5	4,750	9,247	51.4	4,149	10,365	40.0	4,956	11,545	42.9	
JACKSON	613	1,695	36.2	613	1,695	36.2	543	1,905	28.5	702	2,100	33.4	
KANABEC	1,546	3,675	42.1	1,499	3,417	43.9	1,364	3,819	35.7	1,718	4,303	39.9	
KANDIYOHI	5,241	10,632	49.3	5,210	10,330	50.4	4,348	11,540	37.7	5,235	12,743	41.1	
KITTSON	330	810	40.7	335	793	42.2	239	851	28.1	298	946	31.5	
KOOCHICHING	1,196	2,741	43.6	1,179	2,445	48.2	1,037	2,671	38.8	1,229	2,962	41.5	
LAC QUI PARLE	583	1,213	48.1	587	1,235	47.5	541	1,365	39.6	664	1,500	44.3	
LAKE	694	1,627	42.7	648	1,545	41.9	572	1,862	30.7	753	2,115	35.6	
LAKE OF THE WOODS	318	794	40.1	308	765	40.3	270	845	32.0	283	923	30.7	
LE SUEUR	1,675	4,052	41.3	1,509	3,753	40.2	1,380	4,314	32.0	1,778	4,951	35.9	
LINCOLN	365	992	36.8	340	925	36.8	326	1,039	31.4	377	1,140	33.1	
LYON	2,211	5,384	41.1	1,983	5,069	39.1	1,681	5,729	29.3	2,179	6,428	33.9	
MAHNOMEN	860	2,042	42.1	855	2,035	42.0	824	2,368	34.8	938	2,634	35.6	
MARSHALL	527	1,438	36.6	501	1,325	37.8	399	1,487	26.8	543	1,724	31.5	
MARTIN	1,607	4,265	37.7	1,653	4,223	39.1	1,693	4,669	36.3	2,213	5,302	41.7	
MCLEOD	2,269	5,461	41.5	2,358	5,267	44.8	2,141	6,033	35.5	2,591	6,879	37.7	
MEEKER	1,602	3,977	40.3	1,574	3,786	41.6	1,381	4,234	32.6	1,700	4,867	34.9	
MILLE LACS	2,319	6,278	36.9	2,315	5,881	39.4	1,977	6,642	29.8	2,510	7,709	32.6	
MORRISON	2,669	7,137	37.4	2,677	6,709	39.9	2,735	7,252	37.7	3,235	8,052	40.2	
MOWER	3,258	8,755	37.2	3,195	8,561	37.3	2,956	9,918	29.8	3,614	11,323	31.9	

		2018			2019			2020		2021			
County	N	D	%	N	D	%	N	D	%	N	D	%	
MURRAY	534	1,418	37.7	489	1,370	35.7	459	1,515	30.3	520	1,726	30.1	
NICOLLET	2,099	5,254	40.0	2,025	5,029	40.3	1,845	5,809	31.8	2,383	6,516	36.6	
NOBLES	1,769	4,687	37.7	1,586	4,362	36.4	1,290	5,044	25.6	1,582	5,716	27.7	
NORMAN	683	1,596	42.8	663	1,431	46.3	588	1,601	36.7	733	1,788	41.0	
OLMSTED	10,363	22,502	46.1	10,046	21,669	46.4	9,211	25,518	36.1	11,546	30,474	37.9	
OTTER TAIL	5,596	11,533	48.5	5,371	10,958	49.0	5,036	12,288	41.0	6,320	13,703	46.1	
PENNINGTON	710	1,967	36.1	700	1,892	37.0	595	2,203	27.0	772	2,452	31.5	
PINE	2,091	5,890	35.5	2,111	5,775	36.6	1,874	6,577	28.5	2,333	7,490	31.1	
PIPESTONE	555	1,848	30.0	590	1,823	32.4	296	2,058	14.4	391	2,289	17.1	
POLK	2,804	7,002	40.0	2,788	6,892	40.5	2,363	7,631	31.0	3,063	8,320	36.8	
POPE	962	2,024	47.5	893	1,944	45.9	851	2,147	39.6	966	2,444	39.5	
RAMSEY	56,698	132,082	42.9	55,345	126,948	43.6	44,591	145,583	30.6	58,230	165,907	35.1	
RED LAKE	243	697	34.9	246	700	35.1	234	800	29.3	321	881	36.4	
REDWOOD	1,111	2,871	38.7	1,066	2,878	37.0	962	3,195	30.1	1,153	3,789	30.4	
RENVILLE	1,468	3,225	45.5	1,359	2,936	46.3	1,102	3,324	33.2	1,322	3,751	35.2	
RICE	4,820	10,359	46.5	4,734	10,038	47.2	4,261	11,676	36.5	5,327	13,257	40.2	
ROCK	401	1,465	27.4	401	1,376	29.1	366	1,565	23.4	421	1,798	23.4	
ROSEAU	941	2,276	41.3	920	2,181	42.2	707	2,457	28.8	928	2,873	32.3	
SCOTT	7,720	17,310	44.6	7,565	16,440	46.0	6,312	19,173	32.9	8,964	23,454	38.2	
SHERBURNE	5,210	12,946	40.2	5,076	12,315	41.2	4,628	14,332	32.3	6,002	17,313	34.7	
SIBLEY	1,110	2,582	43.0	1,145	2,423	47.3	1,091	2,750	39.7	1,358	3,221	42.2	
ST. LOUIS	15,885	37,564	42.3	14,815	34,865	42.5	12,355	39,175	31.5	16,298	44,881	36.3	
STEARNS	12,095	28,342	42.7	11,833	27,122	43.6	11,138	31,851	35.0	13,893	37,323	37.2	
STEELE	3,086	6,658	46.4	2,902	6,336	45.8	2,691	7,174	37.5	3,338	8,247	40.5	
STEVENS	637	1,280	49.8	633	1,308	48.4	575	1,538	37.4	732	1,752	41.8	
SWIFT	896	1,961	45.7	807	1,928	41.9	671	2,131	31.5	854	2,419	35.3	
TODD	2,153	5,226	41.2	2,046	4,934	41.5	1,847	5,418	34.1	2,170	6,189	35.1	
TRAVERSE	346	735	47.1	335	749	44.7	302	842	35.9	415	943	44.0	
WABASHA	1,207	3,047	39.6	1,157	2,918	39.7	1,082	3,287	32.9	1,347	3,741	36.0	
WADENA	1,649	3,683	44.8	1,667	3,632	45.9	1,389	4,008	34.7	1,804	4,496	40.1	
WASECA	1,472	3,461	42.5	1,408	3,311	42.5	1,314	3,736	35.2	1,603	4,253	37.7	
WASHINGTON	11,382	26,921	42.3	11,138	25,656	43.4	9,411	29,841	31.5	13,321	36,846	36.2	
WATONWAN	807	2,006	40.2	789	1,966	40.1	744	2,236	33.3	925	2,599	35.6	
WILKIN	478	1,226	39.0	468	1,199	39.0	451	1,307	34.5	620	1,446	42.9	
WINONA	2,757	6,811	40.5	2,836	6,617	42.9	2,698	7,459	36.2	2,981	8,560	34.8	
WRIGHT	6,843	16,356	41.8	6,500	15,597	41.7	5,898	17,993	32.8	7,809	21,597	36.2	

	2018			2019			2020			2021		
County	N	D	%	N	D	%	N	D	%	N	D	%
YELLOW MEDICINE	930	1,911	48.7	899	1,818	49.4	817	2,050	39.9	974	2,342	41.6
All	419,613	970,974	43.2	409,785	930,512	44.0	349,354	1,067,875	32.7	457,269	1,240,020	36.9

Figure 1 provides a graphical view of the statewide dental utilization rates by county for 2021, consistent with the information in Table 2 above for the same year. The results for this year were selected to display on the Minnesota map because the rates are most representative of dental utilization prior to the onset of the COVID-19 public health emergency.

Figure 1. Dental Rates by County for Calendar Year 2021



The next set of tables break out the dental utilization rates by managed care or county-based purchasing plan and fee for service. As with previous tables column 'N' denotes the number of people who received at least one dental visit in each of the calendar years 2018 through 2021, out of the total eligible number for the measure which is the 'D' denominator column.

The rate of children between the age of one and twenty with continuous enrollment who received at least one dental visit in each of the calendar years 2018 through 2021 is detailed in Table 3.

It is important to note that the Medica managed care plan did not have a Family and Children/MnCare contract with DHS during most of 2017 or during the 2018 - 2020 plan years. Therefore, the Medica results in this table reflect 18-20 year old enrollees in the Special Needs Basic Care contract. Due to differences in this population from the other children in the table, the Medica results are included for completeness but are not comparable to other health plans.

Table 3 Children's Dental Rates for 2018 to 2021 (Ages 1-20)

	2018				2019			2020		2021		
FFS/MCO	N	D	%	N	D	%	N	D	%	N	D	%
Fee-for-Service	34,100	87,576	38.9	33,646	86,763	38.8	21,522	76,296	28.2	22,388	70,871	31.6
Blue Plus	67,871	130,981	51.8	65,572	125,791	52.1	60,752	160,022	38.0	79,402	185,103	42.9
HealthPartners	34,323	69,274	49.5	33,876	66,863	50.7	27,014	75,260	35.9	34,285	82,602	41.5
Hennepin Health	2,449	5,025	48.7	2,432	4,846	50.2	1,916	5,775	33.2	2,277	6,363	35.8
IMCare	2,411	3,823	63.1	2,228	3,632	61.3	1,896	4,004	47.4	2,205	4,244	52.0
Medica ¹	136	344	39.5	131	314	41.7	102	357	28.6	108	367	29.4
PrimeWest Health	10,118	19,814	51.1	10,114	19,290	52.4	8,247	21,032	39.2	10,220	22,807	44.8
South County Health Alliance	8,931	18,362	48.6	8,820	17,268	51.1	5,168	11,809	43.8	6,158	12,780	48.2
UCare	64,380	125,808	51.2	67,863	128,422	52.8	56,858	152,775	37.2	75,532	169,613	44.5
All MCOs	190,619	373,431	51.0	191,036	366,426	52.1	161,953	431,034	37.6	210,187	483,879	47.9
All MHCP	224,719	461,007	48.7	224,682	453,189	49.6	183,475	507,330	36.2	232,575	554,750	41.9

The rates for adults age twenty-one and over with continuous enrollment who received at least one dental visit in each of the calendar years 2018 through 2021 is detailed in Table 4.

Table 4 Adult Dental Rates for 2018 to 2021 (Ages 21+)

¹ Medica's results are 18-20 year old enrollees in the Special Needs Basic Care contract. For the years included in this report, Medica did not have a Family and Children/MNCare contract with DHS after April of 2017. Due to differences in the age and care needs of this children's population, Medica's results are not comparable to other plans' results.

		2018			2019			2020		2021		
FFS/MCO	N	D	%	N	D	%	N	D	%	N	D	%
Fee-for-Service	30,632	81,996	37.4	28,926	77,002	37.6	21,537	74,121	29.1	24,589	74,040	33.1
Blue Plus	43,829	122,857	35.7	39,796	110,923	35.9	41,131	145,722	28.2	57,617	192,079	30.0
HealthPartners	30,261	76,024	39.8	28,400	69,933	40.6	25,284	84,297	30.0	36,172	107,977	33.5
Hennepin Health	5,230	17,207	30.4	4,412	14,598	30.2	4,417	19,417	22.7	6,334	25,747	24.6
IMCare	1,904	4,188	45.5	1,668	3,798	43.9	1,557	4,438	35.1	1,900	5,082	37.4
Medica	11,660	26,507	44.0	11,150	25,516	43.7	8,411	25,415	33.1	11,168	25,147	44.4
PrimeWest Health	8,305	20,156	41.2	7,876	19,121	41.2	7,064	21,845	32.3	8,655	25,634	33.8
South County Health Alliance	7,779	20,436	38.1	7,311	18,909	38.7	4,625	14,085	32.8	5,775	16,506	35.0
UCare	55,962	142,511	39.3	56,077	139,137	40.3	52,136	172,493	30.2	72,843	214,448	34.0
All MCOs	164,930	429,886	38.4	156,690	401,935	39.0	144,625	487,712	29.7	200,464	612,620	32.7
All MHCP	195,562	511,882	38.2	185,616	478,937	38.8	166,162	561,833	29.6	225,053	686,660	32.8

The statewide rate by managed care or county based purchasing plan, combining children and adults with continuous enrollment who received at least one dental visit in each of the calendar years 2018 through 2021 is detailed in Table 5.

Table 5 Statewide Dental Rates for 2018 to 2021

	2018			2019				2020		2021		
FFS/MCO	N	D	%	N	D	%	N	D	%	N	D	%
Fee-for-Service	64,732	169,572	38.2	62,572	163,765	38.2	43,059	150,417	28.6	46,977	144,911	32.4
Blue Plus	111,700	253,838	44.0	105,368	236,714	44.5	101,883	305,744	33.3	137,019	377,182	36.3
HealthPartners	64,584	145,298	44.4	62,276	136,796	45.5	52,298	159,557	32.8	70,457	190,579	37.0
Hennepin Health	7,679	22,232	34.5	6,844	19,444	35.2	6,333	25,192	25.1	8,611	32,110	26.8
IMCare	4,315	8,011	53.9	3,896	7,430	52.4	3,453	8,442	40.9	4,105	9,326	44.0
Medica	11,796	26,851	43.9	11,281	25,830	43.7	8,513	25,772	33.0	11,276	25,514	44.2
PrimeWest Health	18,423	39,970	46.1	17,990	38,411	46.8	15,311	42,877	35.7	18,875	48,441	39.0
South County Health Alliance	16,710	38,798	43.1	16,131	36,177	44.6	9,793	25,894	37.8	11,933	29,286	40.7
UCare	120,342	268,319	44.9	123,940	267,559	46.3	108,994	325,268	33.5	148,375	384,061	38.6
All MCOs	355,549	803,317	44.3	347,726	768,361	45.3	306,578	918,746	33.4	410,651	1,096,499	37.4
All MHCP	420,281	972,889	43.2	410,298	932,126	44.0	349,637	1,069,163	32.7	457,628	1,241,410	36.9

VI. Report recommendations

DHS will add results from additional measurement years in subsequent annual reports. Results for coverage year 2022, which is the first period requiring corrective plans for results below forty-five percent, will be available in the March 2024 report. As prescribed in Subdivision 2, DHS will add a description of correction action plans if applicable once submitted to the State by the health plans.

DHS notes that the lingering impacts of the COVID-19 public health emergency may need to be considered in the interpretation of the data. The decrease in the overall state dental utilization rate from 2019 to 2021 may continue to be seen in the 2022 coverage year.

Finally, the 2021 Legislature made a significant investment to streamline the rate method for dental services, increased the base rates, and directed managed care organizations to pay at least the new fee-for-service dental rates. Those changes were effective January 1, 2022, so the impact of those changes are expected to be seen in future reports.