

Medicaid (KanCare) Adult Dental Benefits Frequently Asked Questions for Consumers



Who is eligible for the new adult dental benefit?

All people over age 21 who are eligible for Medicaid have access to the new dental benefits. Adults who are eligible for Medicaid include people with disabilities, older adults, and pregnant people.

When did the new adult dental benefits go into effect?

The new covered services for people over age 21 went into effect on July 1, 2022.

What services are covered for people 18-20?

The services covered under Early and Periodic Screening, Diagnostic and Treatment ([EPSDT](#)) are in effect for people up to age 21, and then the adult benefits kick in.

The new services are fillings, crowns, and periodontal care, but what about preventive care and exams?

The Medicaid program covers the new fillings, crowns, and periodontal codes, and the managed care organizations cover up to \$500 annually for cleanings, exams, and X-rays.

Is there a maximum annual benefit for adults?

There is no maximum for the newly covered fillings, crowns, and periodontal care. The managed care organizations have a \$500 annual benefit only for the exams and cleanings.

Are dentures covered in the new benefits?

No. But there are some cases in which dentures are covered. The managed care organizations cover dentures for some people with disabilities and older adults who are enrolled in some of the “home and community-based services” programs. See each managed care organization’s list of value-added benefits for details.

- [Aetna Better Health of Kansas](#)
- [Sunflower Health Plan](#)
- [United Healthcare](#)



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