

Hawki Dental Annual Benefit Maximum Changes

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Health and
Human Services



Hawki
Iowa HHS

Healthy and Well Kids in Iowa (Hawki)

State CHIP Program

- The Children's Health Insurance Program (CHIP) is offered through the Healthy and Well Kids in Iowa (Hawki) program
- Iowa offers Hawki for uninsured children of working families
- Premiums between \$0 - \$40 per month
- Delta Dental of Iowa is currently the sole administrator of the dental program

Hawki Dental Only

- Children with health insurance but no dental coverage

Healthy and Well Children in Iowa (Hawki)



Hawki Dental covers medically necessary dental care for members age 1 through age 18 as part of the CHIP program.



Members currently have a \$1000 Annual Benefit Maximum (ABM) that starts over yearly on July 1st every year; Premiums are between \$0-40 per month. No family pays more than \$40 a month.



Exceptions to the \$1,000 ABM are based on medical necessity (emergency and orthodontia). A prior authorization is required. Medically necessary orthodontia services are paid based on approved treatment plan and do not apply to the \$1000 ABM.



Delta Dental of Iowa is currently the only dental carrier for the Hawki dental benefit.

What is Changing?



Beginning June 1, 2025 - Hawki Members will no longer be subject to the \$1000 ABM for covered dental services



All Hawki Dental member ABM's will be removed on June 1, 2025

Member Example 1

Member exceeds ABM

13-year-old member needs two dental crowns

Prior to Sunset of ABM (\$1,000 Maximum)

- Dentist is paid \$680 for each crown
- Dentist total paid: \$1,360
- Payable amount via Medicaid \$1,000 – Member meets ABM
- Member Responsible for paying: \$360 (crown coverage that exceeded \$1000 ABM)

After Sunset of ABM

- Dentist total amount: \$1,360
- Dentist total paid: \$1,360
- Member Responsible for Paying: \$0
- No benefit maximum, and any covered benefit will be paid at approved fee schedule amount.

Member Example 2

Member has services that counts toward ABM, but does not exceed the ABM

7-year-old member needs four dental fillings

Prior to Sunset of ABM (\$1,000 Maximum)

- Dentist total paid: \$460
- Payable amount via Medicaid/Hawki: \$460
- Member Responsible for paying: \$0
- **Member has \$540 of their annual benefit maximum remaining**

After Sunset of ABM

- Dentist total paid: \$460
- Payable amount via Medicaid/Hawki: \$460
- Member Responsible for paying: \$0
- No benefit maximum, and any covered benefit for the rest of the year will be paid at the approved fee schedule amount.

Member Example 3

Member wants/needs a non-covered service

17-year-old member needs one dental filling and wants to replace a missing tooth with an implant

Prior to Sunset of ABM (\$1,000 Maximum)

- The Dentist is paid \$115 for 1 filling.
- The implant is not a covered service, and the dentist bills the member \$3,400
- Payable amount via Medicaid/Hawki: \$115 for the filling
- Member Responsible for paying: \$3,400
- Member has \$885 of their annual benefit maximum remaining

After Sunset of ABM

- Payable amount via Medicaid/Hawki: \$115 for the filling
- Member Responsible for paying: \$3,400
- No benefit maximum, and any covered service for the rest of the year will be paid at the approved fee schedule amount.

Member Example 4

Orthodontia Coverage

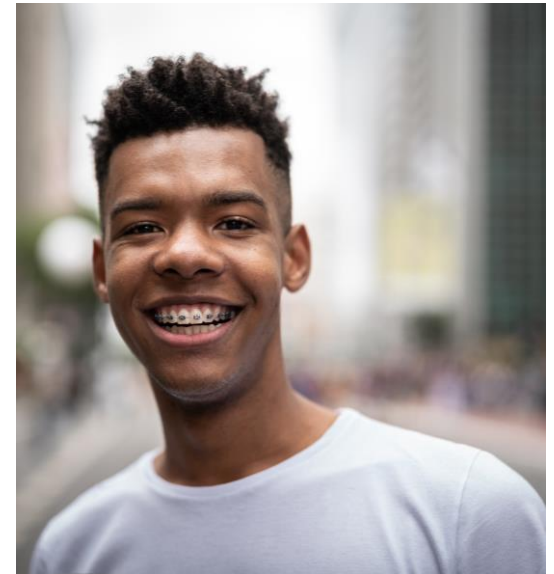
12-year-old member was approved for medically necessary orthodontic services

Prior to Sunset of ABM:

- Dentist total paid for entire orthodontic treatment: \$4,300
- Payable amount via Medicaid/Hawki: \$4,300
- Member Responsible for paying: \$0
- Orthodontic services do not count toward annual ABM
- Member has entire \$1,000 annual benefit maximum remaining

After Sunset of ABM:

- Dentist total paid for entire orthodontic treatment: \$4,300
- Payable amount via Medicaid/Hawki: \$4,300
- Member Responsible for paying: \$0
- No benefit maximum, and any covered service for the rest of the year will be paid at the approved fee schedule amount



Provider Billing

When submitting claims, if the date of service was **prior to** June 1, 2025, the ABM will still be accessed and paid based on the members ABM.

If a member receives services **on or after** June 1st, 2025, the member is **no longer** subject to the ABM and the provider shall bill accordingly

Delta Dental of Iowa Member/Provider Outreach

Website Banners for members and providers

Provider education with encouragement to educate their patients

Member Services helpline training

Updates to member documents (mailings/handouts)

Support Iowa Medicaid's Town Halls in May

Helpful Resources

Iowa Medicaid Member Services

1-800-338-8366

(Toll Free)

515-256-4606

(Des Moines Area)

IMEmember@hhs.iowa.gov

Iowa Medicaid Provider Services

1-800-338-7909

(Toll Free)

IMEproviderservices@hhs.iowa.gov

Delta Dental of Iowa Member Services

Phone

1-800-544-0718

Email

hawki@deltadentalia.com

Website

<https://www.deltadentalia.com/dwp/hawki/>

Delta Dental of Iowa Provider Services

Phone

1-800-544-0718

Email

provrelations@deltadentalia.com

Website

<https://www.deltadentalia.com/dentists/>



Questions

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