

**SB 347 Fiscal Impact**

CPT/HCPCS Code	Description	AR Count	Estimate	Claim Estimate	Arkansas Medicaid	National 50 Percentile (LR) (Base)	Year 1 - 60 %	Year 2 - 80 %	Year 3 - 100 %	Year 1 Impact	Year 2 Impact	Year 3 Impact
D0120	PERIODIC ORAL EXAM ESTABLISHED PATIENT	310,811		310,811	\$26.60	\$58.24	\$34.94	\$46.59	\$58.24	\$2,593,407	\$6,213,734	\$9,834,060
D1208	TOPICAL APPLICATION OF FLUORIDE	192,822		192,822	\$19.95	\$40.51	\$24.31	\$32.41	\$40.51	\$839,933	\$2,402,176	\$3,964,420
D1110	PROPHYLAXIS - ADULT	151,751		151,751	\$48.45	\$101.28	\$60.77	\$81.02	\$101.28	\$1,869,269	\$4,943,137	\$8,017,005
D1120	PROPHYLAXIS - CHILD	155,078		155,078	\$36.10	\$75.12	\$45.07	\$60.10	\$75.12	\$1,391,360	\$3,721,252	\$6,051,144
D2150	AMALGAM-TWO SURFACES, PRIMARY OR PERMANENT AMALGAM-TWO SURFACES, PRIMARY	68,653		68,653	\$80.75	\$202.56	\$121.54	\$162.05	\$202.56	\$2,800,081	\$5,581,352	\$8,362,622
D1206	TOPICAL APPLICATION OF FLUORIDE VARNISH	107,387		107,387	\$19.95	\$42.20	\$25.32	\$33.76	\$42.20	\$576,668	\$1,483,014	\$2,389,361
D2140	AMALGAM-ONE SURFACE, PRIMARY OR PERMANENT AMALGAM-ONE SURFACE, PRIMARY O	64,387		64,387	\$65.55	\$160.36	\$96.22	\$128.29	\$160.36	\$1,974,492	\$4,039,512	\$6,104,531
D7140	EXTRACTION, ERUPTED TOOTH OR EXPOSED ROOT (ELEVATION AND/OR FORCEPS REMO	86,696		86,696	\$72.20	\$211.00	\$126.60	\$168.80	\$211.00	\$4,716,262	\$8,374,834	\$12,033,405
D2930	PREFABRICATED STAINLESS STEEL CROWN - PRIMARY TOOTH	57,210		57,210	\$140.60	\$295.40	\$177.24	\$236.32	\$295.40	\$2,096,174	\$5,476,141	\$8,856,108
D1351	SEALANT - PER TOOTH	77,101	100%	77,101	\$28.50	\$60.77	\$36.46	\$48.62	\$60.77	\$613,878	\$1,550,964	\$2,488,049
D2160	AMALGAM-THREE SURFACES, PRIMARY OR PERMANENT AMALGAM-THREE SURFACES, PRI	19,953		19,953	\$94.05	\$244.76	\$146.86	\$195.81	\$244.76	\$1,053,638	\$2,030,377	\$3,007,117
D2332	RESIN-THREE SURFACES, ANTERIOR	10,277		10,277	\$114.95	\$278.52	\$167.11	\$222.82	\$278.52	\$536,069	\$1,108,539	\$1,681,009
D2330	RESIN-ONE SURFACE, ANTERIOR	11,920		11,920	\$76.95	\$189.90	\$113.94	\$151.92	\$189.90	\$440,921	\$893,642	\$1,346,364
D2331	RESIN-TWO SURFACES, ANTERIOR	8,615		8,615	\$95.95	\$227.88	\$136.73	\$182.30	\$227.88	\$351,302	\$743,940	\$1,136,577
D7210	EXTRACTION, ERUPTED TOOTH REQUIRING REMOVAL OF BONE AND/OR SECTIONING OF TOOTH, AND INCLUDING ELEVATION OF MUCOPERISOTEAL FLAP IF INDICATED.	12,744		12,744	\$138.70	\$312.28	\$187.37	\$249.82	\$312.28	\$620,225	\$1,416,164	\$2,212,104
D2931	PREFABRICATED STAINLESS STEEL CROWN - PERMANENT TOOTH	2,935		2,935	\$158.65	\$348.57	\$209.14	\$278.86	\$348.57	\$148,194	\$352,805	\$557,415
D1510	SPACE MAINTAINER - FIXED-UNILATERAL	1,713		1,713	\$171.95	\$337.60	\$202.56	\$270.08	\$337.60	\$52,435	\$168,097	\$283,758
D2335	RESIN-FOUR OR MORE SURFACES ON INVOLVING INCISAL ANGLE	3,668		3,668	\$144.40	\$350.26	\$210.16	\$280.21	\$350.26	\$241,193	\$498,144	\$755,094
Total Computable										\$22,915,502	\$50,997,823	\$79,080,144
FMAP											69.71%	
Federal Share										\$15,974,396	\$35,550,582	\$55,126,768
<b>State Share</b>										<b>\$6,941,105</b>	<b>\$15,447,240</b>	<b>\$23,953,375</b>
										Year 1	Year 2	Year 3

We estimate a Total Computable for Year 1 of \$22.9 million, or \$6.9 million State Share. We estimate a Total Computable for Year 2 of \$51 million, or \$15.4 million State Share. We estimate a Total Computable for Year 3 of \$79.1 million, or \$24 million State Share.