

Date of Hearing: May 6, 2026

ASSEMBLY COMMITTEE ON APPROPRIATIONS

Buffy Wicks, Chair

AB 1670 (Arambula) – As Amended April 23, 2026

Policy Committee: Health

Vote: 16 - 0

Urgency: No

State Mandated Local Program: No

Reimbursable: No

SUMMARY:

This bill makes desensitization services without an accompanying dental procedure and behavior management covered benefits under the Medi-Cal program, subject to utilization controls, for a patient who needs significant extra time, attention, or personnel, or needs such services preceding a dental visit, to safely deliver dental care.

This bill conditions implementation on the availability of federal financial participation and any necessary federal approvals.

FISCAL EFFECT:

Cost pressures to the Department of Health Care Services (DHCS) of an unknown amount, potentially in the millions of dollars annually, to provide desensitization services without a dental procedure and behavior management to Medi-Cal enrollees. Costs might be limited by the availability of dental providers who are willing and able to provide such services (General Fund, federal funds).

The Legislative Analyst's Office recently warned of General Fund structural deficits of around \$35 billion per year in the 2027-28 fiscal year and ongoing.

COMMENTS:

- 1) **Purpose.** This bill is sponsored by the Association of Regional Center Agencies. According to the author:

For many individuals with developmental, physical, or behavioral conditions, a routine dental visit isn't simple. These visits often require more time, additional staff, and specialized care. Unfortunately, current reimbursement rates don't reflect that, which discourages providers from taking these patients. AB 1670 will make sure that Medi-Cal patients with complex needs can actually access dental care by ensuring providers are better supported when delivering more time-intensive care. It also improves coordination between Medi-Cal and regional centers so patients don't fall through the cracks.

- 2) **Background.** According to a June 2025 report by MACPAC, a federal entity that advises Congress on Medicaid policy, people with intellectual/developmental disabilities (I/DD) have

a higher prevalence of periodontitis (gum disease) and untreated cavities, as well as higher rates of extractions, compared to people without I/DD.

People with I/DD may require specialized services and support, such as additional cleanings, specialized equipment, or accommodations, that are not typically provided to the general population. Behavioral management services, longer appointment times, or sedation help improve access to care and ease patient anxiety for people with I/DD. Dental providers can use behavioral management techniques to create positive experiences and promote cooperation. Dental offices that specialize in treating people with I/DD often use desensitization, which involves gradually exposing an individual to the instructions and stimuli associated with dental exams. Desensitization often takes place over several visits before dentists provide any dental care and may require longer appointment times.

- 3) **Related and Prior Legislation.** AB 1717 (Castillo), of the current legislative session, requires DHCS to increase reimbursement for a specific dental code that applies to “house call” services for dental treatment of a homebound individual.

AB 341 (Arambula), Chapter 612, Statutes of 2025, subject to an appropriation by the Legislature, establishes the Oral Health for People with Disabilities Technical Assistance Center Program to provide oral health treatment training to all regional centers.

Analysis Prepared by: Allegra Kim / APPR. / (916) 319-2081