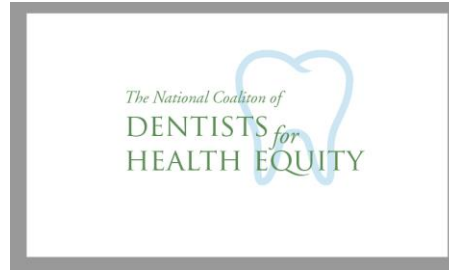


## What's Missing in Medicare: The Social Injustice and Economic Mistake of Denying Dental Coverage in Medicare



### **What's Missing in Medicare: The Social Injustice and Economic Mistake of Denying Dental Coverage in Medicare**

A Position Statement  
(Approved February 26, 2021)

The National Coalition of Dentists for Health Equity (NCDHE) supports the inclusion of comprehensive dental and oral health benefits in Medicare Part B as an integral part of health care for two principled reasons:

- 1) It is a moral imperative that people can access health care regardless of their income; and
- 2) Assuring oral health care benefits to millions of people has the potential to save billions of dollars in total healthcare expenditures. Indeed, it is a social injustice to waste economic resources that might be deployed more equitably.

The NCDHE was established to promote and advocate for equity in health with an emphasis on oral health. It is to that purpose that the NCDHE implores the Congress of the United States to pass legislation to include an adequately funded, comprehensive oral health benefit in Medicare. It is time to end barriers to care created by this coverage gap. Policymakers must support better access to care to prevent and treat harmful conditions in the mouth, which have a significant impact on overall health.”<sup>1</sup>

We describe these rationales in more depth below. We also share the legislative approach we recommend including dental and oral health benefits in Medicare.

#### **Access to oral health care is moral imperative:**

In order to reach one's full health potential, health equity must be comprehensive and include oral health, mental and behavioral health, vision and hearing. Yet, by excluding oral health benefits in Medicare, policymakers have pushed that opportunity out of reach of many

## What's Missing in Medicare: The Social Injustice and Economic Mistake of Denying Dental Coverage in Medicare

older adults. The harm of this policy omission falls harder on some communities more than others, with significant risk to their overall health and wellbeing.

### **Oral health is integral to overall health**

Good oral health supports our ability to speak and eat a healthy diet. It also bolsters our social confidence that comes with fresh breath, clean teeth, and an attractive smile. These factors contribute to workplace success, social acceptability, and personal fulfillment. By contrast, untreated oral infections and undiagnosed oral cancer can be fatal. In fact, oral infections are the only infections that Medicare does not cover. Yet, 37 million individuals with Medicare coverage do not have any dental insurance, and 18.4 million of them cannot access dental care due to its cost. <sup>2</sup>

### **The moral imperative for a dental benefit in Medicare**

“Many older Americans do not have dental insurance because they lost their benefits upon retirement and the federal Medicare program does not cover routine dental care.”<sup>1</sup> Others never had dental insurance and now, in their senior years, have accumulated needs that can severely compromise their overall health. Good oral health in seniors is important because gum diseases have been linked to cardiovascular diseases and difficulties in management of diabetes, both prevalent in seniors.<sup>3</sup>

### **Data shows that older adults need greater support to achieve good oral health**

According to the Centers for Disease Control<sup>4</sup>, oral health inequities in older adults include the following:

- **Untreated tooth decay.** Nearly all adults (96%) aged 65 years or older have had a cavity; 1 in 5 have untreated tooth decay.
- **Gum disease.** A high percentage of older adults have gum disease. About 2 in 3 (68%) adults aged 65 years or older have gum disease.
- **Tooth loss.** Nearly 1 in 5 of adults aged 65 or older have lost all of their teeth. Having missing teeth or wearing dentures can affect nutrition. People without teeth or with dentures often prefer soft, easily chewed foods instead of foods such as fresh fruits and vegetables.

## What's Missing in Medicare: The Social Injustice and Economic Mistake of Denying Dental Coverage in Medicare

- **Oral cancer.** Cancers of the mouth (oral and pharyngeal cancers) are primarily diagnosed in older adults; median age at diagnosis is 62 years.

Oral health inequities among older adults, particularly by race are striking. Due to longstanding inequities in access to dental care, African Americans have higher rates of missing teeth than whites. They also have a higher amount of periodontal or gum disease and untreated dental decay. Various studies indicate that oral health disparities are also significant for American Indians.<sup>5</sup>

Despite these data, the Medicare oral health coverage gap remains. People who count on Medicare have no coverage to restore damaged teeth (fillings); no coverage to resolve painful dental infections (root canals or extractions); and no coverage to replace missing teeth. Adding these key benefits to Medicare would support their overall health, including their ability to eat and to and to restore their self-confidence, by looking like themselves again.

### **Extending oral health benefits in Medicare can make the most of health care dollars:**

The NCDHE also supports a dental benefit in Medicare based on favorable economic data. For example, individuals who access preventive dental care have significantly lower total health care costs. This is especially true for individuals with non-communicable diseases (NCDs) such as diabetes, cardiovascular disease, chronic lung disease, and cognitive disorders. Importantly, with access to oral health care, they have fewer, shorter hospitalizations and emergency department visits.<sup>6</sup>

### **Research shows that oral health access in Medicare could save billions over a decade**

The literature on the interaction of oral and systemic or overall body health is vast, with over 10,000 papers published on the topic.<sup>3</sup> Perhaps the most compelling argument lies in the analyses of private health insurance industry data. It has shown a consistent pattern over the past 15 years that insured individuals who access dental care have lower total health care costs and fewer hospitalizations. to “Recent analysis shows that the economic benefits of adding dental coverage to Medicare are substantial. Conservative estimates suggest that including

## What's Missing in Medicare: The Social Injustice and Economic Mistake of Denying Dental Coverage in Medicare

dental and oral health benefits in Medicare could achieve a net savings of \$63.5 billion over 10 years.”<sup>7</sup>

Private insurers have acted on this information. They actively recruit insured individuals who suffer from NCDs to obtain dental care; waive copays for dental care; and provide coverage for additional dental preventive visits during the year. They also waive minimums. The fact that these practices have gone on for more than a dozen years ensures that the effects of dental care are real, otherwise the companies would have lost money and canceled the enhanced dental care services.<sup>8</sup>

Alas, individuals who are insured on public programs like Medicare, and many state Medicaid programs, are denied the benefits of enhanced dental care. For the most part, they receive no dental care or oral health services at all.

### **New evidence affirms oral health care lowers costs for public insurance programs**

“Two new studies confirm that dental care can help reduce the total health care costs of people enrolled in public insurance programs. These studies mark the first significant look at this issue. Both examine the New York State Medicaid Dental program and have been submitted for publication.”<sup>9</sup>

### **Recommended policy approach:**

On December 12, 2019, the U.S. House of Representatives passed H.R. 3. This measure allocates some of the savings from negotiating drug prices for Medicare recipients to several new health benefits, including almost \$24 billion per year to dental care within Medicare. However, this legislation did not progress. Thus, many poor Medicare recipients remain unable to secure dental care, and the social injustice continues.

We applaud the recent vote of the American Dental Association (ADA) to support a dental benefit in Medicare. However, what the ADA proposed is a complicated mechanism including means testing and direct payment by patients. *These provisions would maintain or exacerbate existing inequities.* Rather than taking this approach, we urge Congress to advance

## What's Missing in Medicare: The Social Injustice and Economic Mistake of Denying Dental Coverage in Medicare

policy solutions like H.R.3 which mandates the inclusion of comprehensive dental and oral health benefits in Medicare Part B.

The failure to include dental health care in Medicare, the nation's largest health insurance program, is an egregious breach of health equity. **Accordingly, National Coalition of Dentists for Health Equity urges Congress to pass legislation which would establish a comprehensive dental and oral health benefit in Medicare Part B. Doing so would improve oral health and advance health equity, while reducing long term healthcare expenditures.**

### References

1. Griffin SO, Jones JA, Brunson D, Griffin PM, Bailey WD. Burden of oral disease among older adults and implications for public health priorities. *Am J Public Health*. 2012;102(3):411-418.
2. Freed, M., Neuman, T., Jacobson, G.: Drilling down on dental coverage and costs for Medicare beneficiaries, Kaiser Family Foundation, 3/13/19  
<https://www.kff.org/medicare/issue-brief/drilling-down-on-dental-coverage-and-costs-for-medicare-beneficiaries/> (Accessed on 10/5/20)
3. Slavkin, H. (For the Santa Fe Group): A National Imperative: Oral Health Services in Medicare, *JADA* 148:281-283, 2017
4. [https://www.cdc.gov/oralhealth/basics/adult-oral-health/adult\\_older.htm](https://www.cdc.gov/oralhealth/basics/adult-oral-health/adult_older.htm) Accessed 10/14/2020
5. Quandt SA, Chen H, Arcury TA: Journal of the American Geriatric Society, Disparities in Oral Health Status Among Older Adults in a Multi-Ethnic Rural Community: The Rural Nutrition and Oral Health Study. *J Am Geriatr Soc*:2009 Aug; 57(8):1369-1375
6. <https://www.prnewswire.com/news-releases/blue-cross-blue-shield-association-reports-dental-and-vision-conditions-closely-related-to-overall-health-300718091.html> Accessed 10/30/2020
7. Lamster, I. B.; Personal Communication
8. Alfano, M.C.: The Economic Impact of Periodontal Inflammation, in Glick M. *The Oral-Systemic Health Connection*, 2<sup>nd</sup> Edition 2019, Quintessence Publishing; 357-368
9. Lamster, I.B.: Personal communication, 2020

What's Missing in Medicare: The Social Injustice and Economic Mistake of Denying Dental Coverage in Medicare