Dental Benefits for Medicaid Adults
Oral Health for Adults: Some Compelling Statistics

Nationally:
• 42% of non-elderly low-income adults have untreated tooth decay.
• More than one-third of elderly, low-income adults have lost all of their teeth.
• 23% of adults over age 65 have not seen a dentist in the last 5 years
  – African-American Seniors: 31%
  – Mexican-American Seniors: 29%
• More than 164 million work hours are lost each year due to dental pain
• The most commonly reported individual health-related service not received because of cost is dental care.

Oral Health for Adults: Some Compelling Statistics

Virginia:

- 27.1% of adults reported putting off dental treatment due to financial concerns
- 19.4% of adults reported being in immediate need of dental treatment
- 11.3% of adults reported that they had at least one tooth that needed to be extracted
- 4.9% of adults reported visiting the Emergency Department for dental pain

Source: VDH, 2014 Adult Dental Access Survey
Access to Publicly Funded Dental Benefits

**Children’s Dental Coverage**
- Mandated benefit under Medicaid (EPSDT)
- Required benefit under Children’s Health Insurance Program (CHIP)
- Included in *Essential Health Benefits* offered in Health Insurance Marketplaces

**Adult Dental Coverage**
- Optional benefit for Medicaid adults
- No Medicare benefit
- Not included in *Essential Health Benefits* offered in Health Insurance Marketplaces
Dental Benefits in Virginia

Medicare
• No dental benefits
• Dually eligible (Medicare AND Medicaid) – some limited cleanings and extraction benefit

Traditional Dental Benefit
• Prevention services have no cost sharing
• Yearly cap

Exchange Dental Benefit
• Pediatric
  – Subsidies
  – Deductible
• Adult
  – No mandate
  – No subsidies

Almost 40% of adults in Virginia report having NO dental insurance
Dental Benefits in Virginia

Medicaid and FAMIS/FAMIS MOMS

• Comprehensive dental coverage for children and pregnant women
  – Children defined as under 21 for Medicaid, under 19 for FAMIS

• Extraction benefit for adults
  – Caretaker adults
  – Aged, blind and disabled
Medicaid Adult Dental Coverage
By State

1. Idaho provides extensive dental coverage to adults with disabilities and other special health care needs; all other adult members receive emergency only benefits. Virginia provides extensive benefits to pregnant women.

# Categories of Medicaid Adult Dental Benefits

<table>
<thead>
<tr>
<th>Extensive</th>
<th>Limited</th>
</tr>
</thead>
<tbody>
<tr>
<td>A more comprehensive mix of services, including many diagnostic, preventive, and minor and major restorative procedures. It includes benefits that have a per-person annual expenditure cap of at least $1,000. It includes benefits that cover at least 100 procedures out of the approximately 600 recognized procedures per the ADA’s Code on Dental Procedures and Nomenclature.</td>
<td>A limited mix of services, including some diagnostic, preventive, and minor restorative procedures. It includes benefits that have a per-person annual expenditure cap of $1,000 or less. It includes benefits that cover less than 100 procedures out of the approximately 600 recognized procedures per the ADA’s Code on Dental Procedures and Nomenclature.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emergency</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relief of pain and infection. While many services might be available, care may only be delivered under defined emergency situations.</td>
<td>No Dental Benefit</td>
</tr>
</tbody>
</table>
Emergency Department Visits for Dental Services Continue to Rise

- An American Dental Association (ADA) analysis reports ER dental visits nearly doubled between 2000 and 2010
  - Among adults (21-64), the percentage of ER dental visits paid by Medicaid rose from 27.9% in 2006 to 32.4% in 2012

- In 2012, ED dental visits cost the U.S. health care system $1.6 billion, with an average cost of $749 per visit.

- ADA estimates that diverting ER dental visits could save Maryland’s Medicaid program $4 million annually

Cutting Dental Benefits Increases Emergency Department (ED) Use

- Removing a comprehensive dental benefit for California Medicaid adults in 2009 resulted in 1,800 additional ED visits annually.
- After adjusting for inflation, the cost of dental ED visits increased by 68% after the policy change.
- California has reinstated most of its Medicaid adult dental benefits.

Rate of Hospital ED Visits for Dental Conditions per 100,000 Persons

<table>
<thead>
<tr>
<th></th>
<th>Rate Prior to 2009 Policy Change</th>
<th>Rate After 2009 Policy Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source:</td>
<td>“Eliminating Medicaid Adult Dental Coverage In California Led To Increased Dental Emergency Visits And Associated Costs;” Singhal, et. al, Health Affairs; May 2015.</td>
<td></td>
</tr>
</tbody>
</table>
Integrating Oral Health & Primary Care Leads to Improved Health and Lower Costs

- Early Oral Care Saves More
  - 2012 Cigna study shows medical savings when periodontal conditions are treated

  Average annual savings for those individuals in the study who had proper periodontal treatment

<table>
<thead>
<tr>
<th>Population</th>
<th>Savings*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes</td>
<td>$1,292 or 27.6%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>$2,183 or 25.4%</td>
</tr>
<tr>
<td>Stroke</td>
<td>$2,831 or 34.7%</td>
</tr>
<tr>
<td>ALL CUSTOMERS**</td>
<td>$1,020 or 27.5%</td>
</tr>
</tbody>
</table>

* Not an underwriting decrement
** All customers regardless of condition

Customers with gum disease receiving appropriate care have:
- 67% lower hospital admission rate
- 54% lower ER rate

Customers receiving proper preventive dental treatment have, on average:
- 12.5% less extractions
- 5.4% less root canals

Source: Cigna 2013 National Segment Client Forum
Significant annual cost savings are possible when individuals with certain chronic diseases (diabetes, cerebral vascular disease, or coronary heart disease), or who were pregnant, received dental treatment for their gum disease, after accounting for the effect of diabetes.

Significant decreases in annual hospitalizations are possible when individuals with certain chronic diseases received treatment for their gum disease, after accounting for the effect of diabetes.

Source: Jeffcoat, M., et. al., “Periodontal Therapy Improves Outcomes in Systemic Conditions.” Abstract, American Association of Dental Research; March 21, 2014
## Cost Estimates to Enhance Dental Benefits for Virginia Medicaid Adults

<table>
<thead>
<tr>
<th>Benefit Enhancement Options</th>
<th>FY 2015 (GF)</th>
<th>FY 2015 (NGF)</th>
<th>FY 2015 (Total Funds)</th>
<th>FY 2016 (GF)</th>
<th>FY 2016 (NGF)</th>
<th>FY 2016 (Total Funds)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Option 1: Current covered services plus routine preventive services</td>
<td>$7,563,750</td>
<td>$7,563,750</td>
<td>$15,127,500</td>
<td>$9,530,325</td>
<td>$9,530,325</td>
<td>$19,060,650</td>
</tr>
<tr>
<td>Option 2: Comprehensive benefits to include routine preventive, restorative and periodontal services</td>
<td>$30,255,000</td>
<td>$30,255,000</td>
<td>$60,510,000</td>
<td>$63,535,499</td>
<td>$63,535,499</td>
<td>$127,070,998</td>
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</table>

Source: Department of Medical Assistance Services

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