Making the Case for Dental Coverage for Adults in All State Medicaid Programs

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Most dental offices’ patient volume nearing normal, data suggests

The latest polling from American Dental Association’s Health Policy Institute suggests over 60% of dental offices are running business as usual.

The New York Times

The Upshot

How’s the Economy Doing? Watch the Dentists

Why you don’t need dental insurance to go to the dentist
• Highlight the challenges low-income adults face in accessing oral health care services

• Provide an overview of the adult dental benefits landscape in state Medicaid programs

• Review recent research on the fiscal impact of adding comprehensive adult dental benefits to state Medicaid programs. How much does it really cost?
Dental Care Stands Out in Terms of Cost Barriers

Cost barriers to dental care are higher than for any other type of health care service.

Source: Health Policy Institute analysis of National Health interview Survey data for 2019. Unpublished. Note: Percentages indicate those who reported they did not obtain needed services in the past 12 months due to cost.
Main Barriers to Dental Care Relate to Cost

Percentage Indicating Financial and Non-Financial Barriers to Needed Dental Care

- **All Ages**: 13.0% Financial, 4.5% Non-Financial
- **Children (2 to 18)**: 3.3% Financial, 1.3% Non-Financial
- **Adults (19 to 64)**: 17.4% Financial, 5.8% Non-Financial
- **Seniors (65+)**: 8.8% Financial, 3.2% Non-Financial
Low-Income Adults Face the Biggest Challenge

The most commonly cited barriers to accessing needed dental care all relate to cost.

Of any age and income group, low-income adults face the most significant cost barriers to dental care.
Oral Health Equity

COST BARRIERS TO DENTAL CARE have fallen significantly for children while increasing for adults and seniors.

FOR ALL AGE GROUPS, Hispanics and Blacks are most likely to face cost barriers to dental care.

RACIAL DISPARITIES IN COST BARRIERS to dental care have narrowed slightly for children and widened for adults and seniors.
Impact of Medicaid Dental Coverage

Providing adult dental coverage in Medicaid significantly reduces emergency department visits and spending for dental conditions.

These cost savings are realized by diverting care from hospital emergency departments to more cost-effective settings like a dental office or community health center.
Impact of Medicaid Dental Coverage

Low-income adults living in states where the Medicaid program provides comprehensive dental coverage are far less likely to experience negative economic consequences stemming from poor oral health.
When adults gain extensive dental coverage through Medicaid, their job prospects improve. The impact is largest for Black Medicaid enrollees.
As of today*…

27 states provide extensive adult dental benefits in their Medicaid programs,

14 states provide limited benefits,

9 provide emergency-only benefits, and

1 provides no benefits.
What Would it Cost to Provide Medicaid Dental Coverage?

- We estimated the fiscal impact of adding extensive dental coverage for adults in the state Medicaid programs that did not provide it as of January 2021.

- We estimated the increased dental care costs as well as reductions in medical care costs among beneficiaries with diabetes, heart disease, and who become pregnant.

- We did not estimate emergency room cost savings due to data constraints.

- We estimated the federal and state shares of spending according to current FMAP rates.

- We summarized results for all 28 states combined as well as state by state.
Increased access to dental care is associated with lower medical care costs among patients with certain conditions such as diabetes.

https://www.carequest.org/topics/medical-dental-integration
What Would it Cost to Provide Extensive Dental Coverage?

<table>
<thead>
<tr>
<th>Adult Dental Benefit Classification at Baseline</th>
<th>Number of States</th>
<th>Average Baseline Utilization</th>
<th>Utilization Difference Compared to Extensive</th>
<th>Average Annual Expenditures Per Patient</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>3</td>
<td>0.9%</td>
<td>27.5%</td>
<td>$784</td>
</tr>
<tr>
<td>Emergency</td>
<td>13</td>
<td>9.2%</td>
<td>19.2%</td>
<td>$445</td>
</tr>
<tr>
<td>Limited</td>
<td>16</td>
<td>21.8%</td>
<td>6.5%</td>
<td>$281</td>
</tr>
<tr>
<td>Extensive</td>
<td>19</td>
<td>28.4%</td>
<td>--</td>
<td>$437</td>
</tr>
</tbody>
</table>

Source: Health Policy Institute analysis of data obtained from the Transformed Medicaid Statistical Information System (T-MSIS), maintained by the U.S. Centers for Medicare and Medicaid Services (CMS).

We leveraged newly available Medicaid claims data for all states to calculate current dental care use rates and spending levels for Medicaid beneficiaries. This allowed for much more accurate predictive analysis.
What Would it Cost to Provide Extensive Dental Coverage?

<table>
<thead>
<tr>
<th></th>
<th>Dental care spending</th>
<th>Medical care savings</th>
<th>Net cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>State share</td>
<td>$401,474,150</td>
<td>$100,503,357</td>
<td>$300,970,792</td>
</tr>
<tr>
<td>Federal share</td>
<td>$707,533,813</td>
<td>$172,623,476</td>
<td>$534,910,337</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$1,109,007,963</strong></td>
<td><strong>$273,126,834</strong></td>
<td><strong>$835,881,130</strong></td>
</tr>
<tr>
<td>Per enrollee per month</td>
<td>$6.16</td>
<td>$1.52</td>
<td>$4.64</td>
</tr>
</tbody>
</table>

Note: Table reflects net cost estimates for 28 states combined that currently have no, emergency-only, or limited adult Medicaid dental benefits. Estimates are annual. See Appendix A for full methodology.

It is important to note that our analysis likely overestimates net costs. We were conservative in our assumptions and we also do not include emergency room cost reductions in our analysis.
Custom State Analyses

Estimating the Cost of Introducing a Medicaid Dental Benefit in Maine

Authors: Marko Vujicic, Ph.D., Chelsea Foose, D.M.D., M.P.H.

Key Messages:
- The total cost for legislation (Draft No. 100) of the Maine Legislature exceeded the cost of the state of Maine to be $3.9 million annually in increased Medicaid dental benefit costs. The total cost was comprised of staff salaries and associated expenses for training in dental services.
- The analysis, which examined additional Medicaid services included in the legislation, such as preventive care, orthodontic care, and oral health education, found that these services would be cost-effective in reducing long-term medical costs associated with dental health issues.
- The study also found that the legislation would be cost-effective in reducing long-term medical costs associated with dental health issues.

Introduction
Medicaid provides dental insurance coverage for low-income individuals. The total cost for legislation (Draft No. 100) of the Maine Legislature exceeded the cost of the state of Maine to be $3.9 million annually in increased Medicaid dental benefit costs. The total cost was comprised of staff salaries and associated expenses for training in dental services.

Contact Us
Contact the Health Policy Institute for more information or to request a copy of the report.

Health Policy Institute
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Recent Developments

The Register-Herald

New state law has led to an increased number of West Virginians receiving dental care

By Jessica Farrish The Register-Herald Mar 19, 2022

Virginia to expand Medicaid to provide dental benefits to adults

Posted at 11:15 PM, Jun 28, 2021 and last updated 6:42 AM, Jun 29, 2021

RICHMOND, Va. -- For the first time, Virginia is expanding its Medicaid program to provide comprehensive dental benefits to adults. Beginning July 1, more than 750,000 Virginians will be eligible for the expanded benefits.

New KanCare Adult Dental Benefit!

Starting July 1, all adults enrolled in the Kansas Medicaid Program will have access to comprehensive dental benefits!

Maryland passes Adult Dental Care Medicaid Expansion

April 6, 2022 by Rob Flaks

MARYLAND- A bill to add adults to the dental care portion of Maryland’s Medicaid has passed the state legislature and heads to Governor Hogan’s desk with a veto-proof majority.

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Recent Developments

Tennessee Offers to Expand Dental Schools as Medicaid Coverage Stretches Need

By Blake Farmer, Nashville Public Radio
MARCH 31, 2022

New Hampshire Bulletin

Expanded dental benefits for Medicaid recipients on the cusp of becoming reality

By ANNMARIE TIMMINS - MAY 13, 2022  5:47 AM

In 2009, as the state struggled to make ends meet during the Great Recession, Hawaii cut dental care funding for adults insured by Medicaid. This has been catastrophic for many islanders who live with extremely limited incomes. With no affordable way to get treatment, those who developed painful dental problems or gum disease had nowhere to turn, other than a hospital emergency room.

The time is now to bring back crucial dental services, and also provide for restorative care such as root canals for adults in need, and who may not have been able to see a dentist in 10 years or more.
Moving from Optional to Essential?

- Make comprehensive adult oral health coverage a permanent part of the Medicaid program for all states. Congress could designate dental services as a mandatory benefit category for all Medicaid-enrolled adults. The experience with children can serve as a blueprint.

- Congress could consider policy aimed at establishing a baseline of comprehensiveness for adult dental services in Medicaid. Policymakers can amend the current statutory definition of Medicaid dental services to address the full range of oral health conditions, specifying categories of services as necessary.

- Congress could consider increasing the FMAP for states to support comprehensive oral health coverage. Adequate funding of state Medicaid programs is necessary for the successful implementation of a new benefit.

- Ensure that fiscal estimates (or CBO scoring) properly account for potential medical care cost reductions, including reduced emergency room spending, associated with expanded dental coverage for adults in Medicaid programs.