



## 5 Steps to Promote Incurred Medical Expense (IME) Reimbursement in Your State

Approximately 1.3 million nursing home residents face the greatest barriers to accessing dental care of any population group, and this number is expected to increase. Under federal law, “A skilled nursing facility must directly or under agreements with others provide for the provision of routine and emergency dental services to meet the needs of each resident.” Incurred Medical Expense (IME) provides a way for long-term care residents to pay for dental care without decreasing their personal allowance or taking money from the nursing homes.

### Step 1: Define the Problem and the Scope

The number of nursing home residents, where they live, and their financial resources are critical pieces of information to gather. For example, in your community perhaps residents who lack access to dental care are in rural nursing homes where dentists are scarce. You’ll define the problem by identifying long-term care (LTC) demographics, dental resources, and other stakeholders. Here are some sample questions to consider:

- How many nursing homes are in the area?
- How many beds are in each home?
- What percentage of residents is on Medicaid?
- Are there dentists serving the facilities and how many?
- What percentage of LTC residents lack access to dental care?
- Is this an urban or rural area?
- How many dentists serve the community?

### Step 2: Meet with State Medicaid Officials

The IME reimbursement mechanism is commonly used for expenses like hearing aids and eyeglasses. Find out what systems, steps and protocols are in place for these non-dental IME adjustments. Use talking points (see page 2) to inform, educate, and advocate for the use of IME for dental expenditures. Obtain state IME adjustment timing expectations and recommended procedures for dental IME adjustments.

### Step 3: Meet with the Leadership of State Long-term Care Associations

Use talking points (see page 2) to inform, educate, and advocate for the use of IME for dental expenditures.

### Step 4: Build Support by Communicating with Member Dentists

Communicate with and educate members using the LTC demographics, dental resources and stakeholder information you identified in step 1. Let them know the challenges that LTC residents in your area are facing in accessing dental care. Supplement your information with materials available at [ADA.org/IME](https://www.ada.org/IME), including the archived webinar, “Helping Nursing Home Residents Pay for Dental Care Through IME Billing.”

### Step 5: Use Success Stories to Help Member Dentists Implement a Program

Build up a small library of case studies that illustrate best practices in creating a program to provide dental care to nursing home residents. It will be easier for members to implement a program in their community if they have examples of other dentists who have succeeded.

## Talking Points for Incurred Medical Expenses: Paying for Dental Care

- As people live longer and retain more natural teeth, the complexity of their treatment needs increases.
- According to the U.S. Administration on Aging, the population of Americans older than 65 years is expected to double to about 71 million by 2040.
- The population of Americans older than 85 years is expected to increase to 9.6 million by 2030.
- A growing percentage of aging adults are becoming semi-dependent, many requiring nursing home care.
- 1.3 million seniors currently live in nursing homes.
- Many arrive at nursing homes with poor teeth having gone for long periods of time without seeing a dentist.
- Neglecting oral health care can lead to terrible pain for nursing home residents. Studies suggest this problem may contribute to pneumonia, which is a serious concern for institutionalized older people.
- Studies have shown that regular brushing and professional dental care might reduce the risk of pneumonia. A 2008 systematic review published in *The Journal of the American Geriatrics Society* said about one in 10 cases of deaths from pneumonia in nursing homes could be prevented by improving oral hygiene.
- Medicare does not cover routine dental care like cleanings and fillings, so this is not an option for nursing home residents.
- A majority of states provide, at most, a limited array of dental services to Medicaid enrolled adults.
- There appears to be no national assessment of oral health in nursing homes.
- Many medications common for nursing home residents can reduce saliva and dry out the mouth, which can help speed the rate of dental decay.
- Incurred Medical Expense regulations can help most nursing facility residents who are enrolled in Medicaid pay for dental care.
- Medicaid residents with Social Security or other retirement income may be able to pay for medically-necessary dental care that is not covered by Medicaid.
- The process enables nursing facility residents to use their monthly income, usually applied to their nursing home care, to receive health care services not covered under Medicaid. How does this work?
  - The resident makes an arrangement with the caseworker to reduce his or her payment toward expenses at the nursing facility during that month and uses those funds to pay for the dental services. The patient does not increase their total out-of-pocket expenditures for the dental care.
  - Since the resident reduced their payment to the nursing home, that must be made up to keep the nursing home whole.
  - To achieve this, Medicaid temporarily increases the amount it pays to the facility. The end result is that the patient receives the care, the health care provider is paid at his or her private rate, and the nursing home is still receiving its normal monthly fee.
- The ADA and state dental societies provide a number of resources to assist residents, facilities, and or Medicaid caseworkers.

## Questions? Contact us!

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