Improving the Oral Health of Older Adults & Persons With Disabilities

Our mission is to improve the oral health of all.



MOM VIDEO PLAYS HERE



Growing Evidence of Oral Health's Impact on General Health

U.S. Surgeon General's Report

- "Oral health is integral to general health; this report provides important reminders that oral health means more than healthy teeth and that you cannot be healthy without oral health."
- "...studies have demonstrated an association between periodontal diseases and diabetes, cardiovascular disease, stroke, and adverse pregnancy outcomes."
- "...there are profound and consequential disparities in the oral health of our citizens. Indeed, what amounts to a *silent epidemic* of dental and oral diseases is effecting some population groups."

World Health Organization

- "The interrelationship between oral health and general health is particularly pronounced among older people.
- Poor oral health can increase the risks to general health and, with compromised chewing and eating abilities, affects nutritional intake.
- Insufficient nutrition may ultimately lead to low immune response.
- Severe periodontal disease is associated with diabetes and HIV infection."



Improving Oral Health for Older Adults...A National Issue

Access to dental care is one of the greatest challenges facing older adults and their care advisors.

Oral care in elderly 'deserves au significant attention,' study finds

NBC News

Lack of access to dental care leads to expensive emergency room care Association of Health Care Journalists

Dental care for seniors — a need that goes largely unfilled –

Georgia Health News

Oral Health America – Wisdom Tooth Project

Dental problems are among the most common health problems experienced by older adults.

American Geriatric Society's Health in Aging Foundation

Poor oral health can have negative impact on seniors' overall health

American Journal of Health Behavior



Oral Health for Adults: Some Compelling Statistics

- Nearly one-third of adults have untreated tooth decay.
- One in four adults ages 65 and older 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 164,000 works 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*.



Persons with Disabilities Also Face Significant Oral Health Challenges

 Nationally, adults with disabilities are less likely to have a dental visit within the past year (60%) as adults without disabilities (70%)¹

A 2012 Tufts University landmark study concluded:

- People with intellectual and developmental disabilities are more likely to have poor oral hygiene, periodontal disease and untreated tooth decay than the general population –
- A review of 4,732 adult patients with disabilities found 80% had periodontal disease²

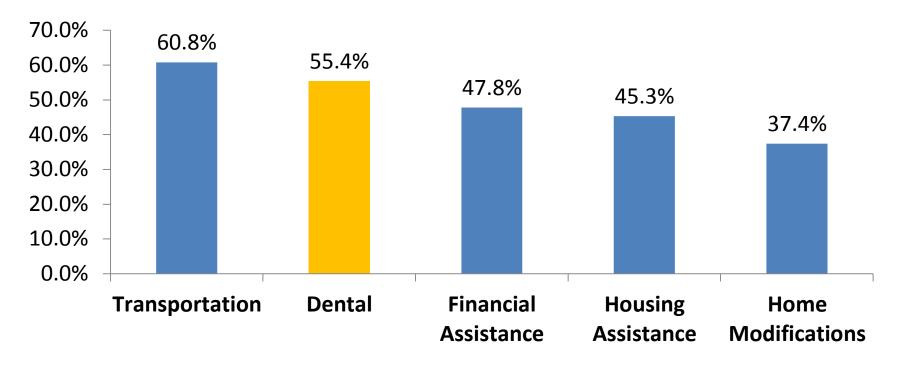
Source: 1. Centers for Disease Control; 2008 Behavioral Risk Factor Surveillance System (BRFSS)

2. Tufts University; TuftsNow; "Improving the Oral Health of Adults with Special Needs Proves Challenging;" August, 2012



Dental Services...A Significant Unmet Need

"Top Five Most Frequent Unmet Needs" As Identified by Aging/Disabilities Information & Referral Agencies





Emergency Department Visits for Dental Services Continue to Rise

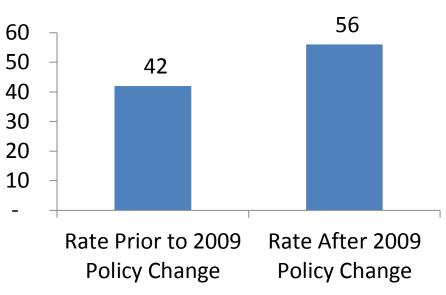
- An American Dental Association (ADA) analysis reports ER dental visits nearly doubled between 2000 and 2010
 - Dental ER visits increased from 2.11 million in 2010 to 2.18 million in 2012.
 - Among adults (21-64), the percentage of ER dental visits paid by
 Medicaid rose from 27.9% in 2006 to 32.4% 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 Leads to Increased 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

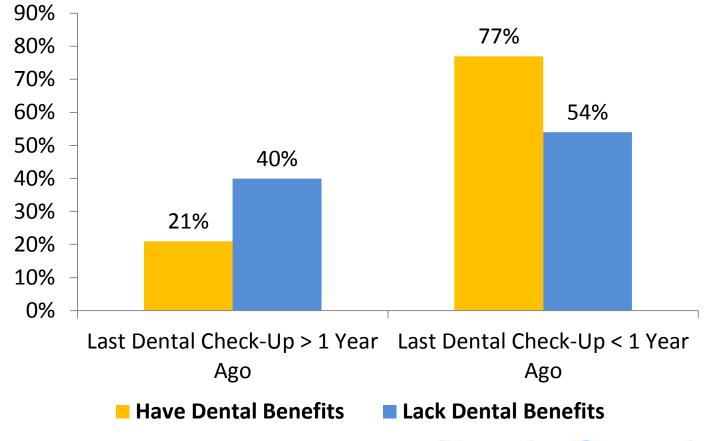




Source: "Eliminating Medicaid Adult Dental Coverage In California Led To Increased Dental Emergency Visits And Associated Costs;" Singhal, et. al, Health Affairs; May 2015.



Dental Insurance Plays A Major Role in Accessing Care





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

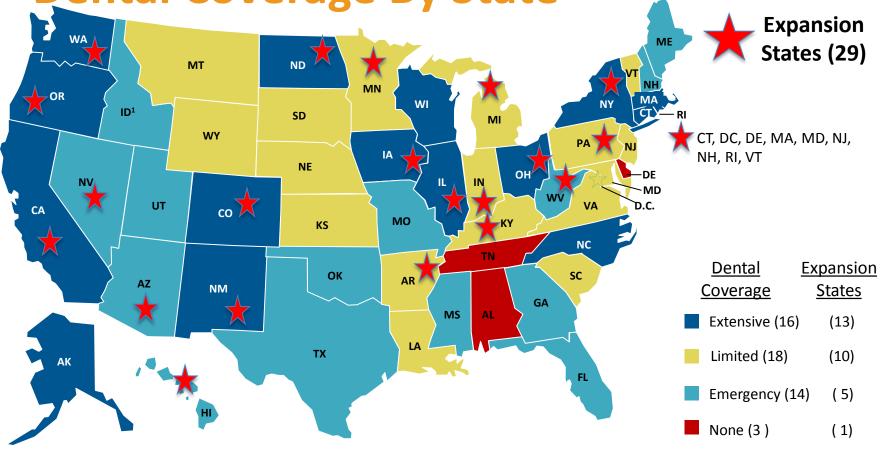
- Optional benefit for Medicaid adults
- No Medicare benefit
- Not included in Essential
 Health Benefits offered in
 Health Insurance
 Marketplaces





Impact of Medicaid Expansion on 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.

Source: Yarbrough C, Vujicic M, Nasseh K. "More than 8 Million Adults Could Gain Dental Benefits through Medicaid Expansion." Health Policy Resources Center Research Brief. American Dental Association. February 2014. Updated by DentaQuest Foundation April 8, 2015.



Categories of Medicaid Adult Dental Benefits

Extensive

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

Limited

A limited mix of services, including some diagnostic, preventive, and minor restorative procedures. It includes benefits that have a perperson 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

Emergency

Relief of pain and infection. While many services might be available, care may only be delivered under defined emergency situations

None

No Dental Benefit



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

Population	Savings*
Diabetes	\$1,292 or 27.6%
Heart Disease	\$2,183 or 25.4%
Stroke	\$2,831 or 34.7%
ALL CUSTOMERS**	\$1,020 or 27.5%

Prevention produces results

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



^{*} Not an underwriting decrement

^{**} All customers regardless of condition

Integrating Oral Health & Primary Care Leads to Improved Health and Lower Costs

Treating Gum Disease Means Lower Annual Medical Costs standard St

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.

(40.9%)

Treating Gum Disease Reduces Hospital Admissions 21.2% 28.6%

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

Not to scale



Not to scale

Oral Health as a Social Justice Issue



- Everyone should have the same opportunities to live a healthy life
- A person in poor oral health is not healthy

- Injustice anywhere is a threat to justice everywhere. We are caught in an inescapable network of mutuality tied in a single garment of destiny. Whatever affects one directly affects all indirectly.
- It's everyone's responsibility to advocate for and mobilize the many who don't have access to oral health care and prevention
- Nobody should suffer from a chronic disease that is completely preventable
- Until we all have an equal opportunity to live happy and healthy lives, we will live in an unjust society



Committed to Systems

ORAL HEALTH 2020

POLICY

Oral health is a key component of health policy

Oral health policy consistent at local, state and federal levels

Oral health measurement systems in place

Policy to allow expanded workforce

FINANCING

Sufficient funding to support care, prevention and training

Alignment of payment with evidence, prevention, disease management and outcomes

CARE

Dental workforce sufficient to meet needs efficiently & effectively

Care based on evidence, prevention, disease management and outcomes

Oral health integrated into all aspects of health care

Consumer focused care delivery

COMMUNITY

Oral health integrated into education and social services

Optimal oral health literacy

Strong community prevention and care infrastructure

Provider base representative of community



ENVIRONMENTAL SUPPORTS

Improve public perception of the value of oral health

Advancing interprofessional education and coordinated care



GOAL

Eradicate dental disease in children

TARGET

75% of children reach age 5 without a cavity

GOAL

Oral health incorporated into the primary education system

TARGET

The 10 largest school districts have incorporated oral health into their systems

coal Comprehensive national oral health measurement system TARGET

A national and state-based oral health measurement system is in place

GOAL

Mandatory inclusion of an adult dental benefit in publicly funded health insurance TARGET

At least 30 states have a comprehensive Medicaid adult dental benefit TARGET

Medicare includes a comprehensive dental benefit

OVERALL GOAL

Reshape systems to improve lifelong oral health and eradicate dental disease in children



Building a Plan to Move







Thank you!

http://dentaquestfoundation.org/

