



ADVOCACY TOOLKIT

**Good reasons for states to preserve or
expand Medicaid adult dental benefits:**

A Toolkit for Advocates

During an economic downturn, Medicaid adult dental benefits are among the first areas that many states consider cutting.

Yet whatever short-term “savings” might result from cutting adult dental benefits could prove costly to states down the road. This toolkit can help you educate policymakers and other stakeholders in your community.

A recent federal decision lends a new sense of urgency to advocate effectively for Medicaid adult dental benefits. Recently,

the Centers for Medicare & Medicaid Services (CMS) proposed a rule that would allow states to reduce or eliminate optional benefits without any loss of enhanced federal funding. If implemented, this rule could give states a new incentive for cutting the adult benefits offered through their Medicaid program.

I. Be Prepared for the Opportunities

Beyond defending adult coverage, oral health advocates should consider opportunities to expand dental benefits for adult members of Medicaid. The same key messages that can be used to defend coverage can also be used to urge legislators to enhance the dental services that are covered by Medicaid or raise the annual caps.

Consider the progress in recent years that many states have made in improving Medicaid dental benefits for adult members. Don't get trapped in a partisan mindset. The following changes were approved in states that include both Democratic and Republican governors:

- **Delaware:** In August 2019, a law was enacted to create a limited dental benefit for all adult Medicaid members. The bill authorized the creation of a \$1,000 per year dental benefit, along with the option for an additional \$1,500 of annual services with prior authorization. There is a \$3 copay. The new benefit took effect on October 1, 2020, and the \$3 copay has been suspended for the duration of the pandemic.
- **Maryland:** In 2019, Maryland launched the Medicaid adult dental waiver. This program gives Medicare/Medicaid dual-eligible adults access to \$800 per year for diagnostic, preventive, and restorative dental care. In March 2020, the governor passed a supplemental budget that included \$1 million to extend Medicaid dental coverage for pregnant women to 60 days postpartum, taking effect on January 1, 2021.
- **Massachusetts:** Over the past decade, legislators have incrementally restored various Medicaid dental services for adult members. Most recently, periodontal services were restored through the fiscal year 2019 budget.
- **Vermont:** On January 1, 2020, the annual maximum dental benefit for adult members of Medicaid was nearly doubled, rising from \$510 to \$1,000. In addition, members are allowed up to two preventive visits per year without a copay and without the visits being counted towards the annual maximum.
- **Virginia:** The legislature approved an extensive Medicaid adult dental benefit in its fiscal year 2021 budget. After initially postponing the funding, the legislature finalized the bill and its funding in October 2020. The budget bill was signed by the governor, and the improved benefit will take effect on July 1, 2021.
- **West Virginia:** In March 2020, the state created a limited Medicaid adult dental benefit that is expected to begin in early 2021. Capped at \$1,000 per year, coverage will include diagnostic, preventive and restorative services. If approved by federal health officials, the benefit will be funded by a Managed Care Organization provider tax.

II. Key messages

1. Robust dental coverage is highly valued by adults.

- In a survey of U.S. adults, 51% said they were concerned about their oral health, making it a greater concern than heart, eye, digestive, mental, and skin health.

2. Without robust Medicaid coverage, the cost of dental care will be unaffordable for many adults.

- A national survey showed adults were more likely to cite financial barriers as a reason for not getting dental care than they were to cite this as a barrier to medical care, prescription drugs, mental health services or eyeglasses.
- Medicaid shelters low-income families from high costs. A recent analysis shows the average annual out-of-pocket (OOP) cost for adult dental care was \$196 for those covered by Medicaid, \$283 for those with private medical coverage, and \$466 for those who lack medical coverage. For the working poor, even a small increase in OOP costs can make dental care unaffordable.

3. Maintaining a healthy mouth can improve adults' overall health.

- The Mayo Clinic calls oral health “a window to your overall health” and cites its link to heart disease, diabetes, strokes, pneumonia, and pregnancy complications.

4. Having a regular source of dental care improves adults' job prospects.

- Having unsightly or missing teeth puts people at a disadvantage for good-paying jobs. Dental coverage helps adults keep their mouths healthy.
- National research shows that giving all working-age adults access to routine dental care would enhance the job prospects of nearly 10,000 currently unemployed adults. When more people find jobs, state tax revenues rise.

5. Preserving adult dental benefits can reduce costly visits to hospitals.

- Low-income adults without Medicaid dental coverage are more likely to address nontraumatic dental conditions (NTDCs) by seeking care at hospital emergency departments (EDs). The care provided in EDs is expensive and rarely addresses the root causes of NTDCs.
- Unnecessary ED visits are a drain on Medicaid budgets. In 2016, when Maryland adults lacked Medicaid dental benefits, the state's Medicaid program paid \$10 million to cover dental-related ED visits.
- NTDCs can intensify the stress on frontline health care workers during a pandemic.
- After Missouri restored Medicaid dental benefits to about 350,000 adults, the state observed a 38% drop in the rate of ED visits for NTDCs.

6. Preserving adult dental coverage can save states money by curbing Medicaid costs in other areas.

- Treating gum disease makes it easier for people with diabetes to manage their blood sugar levels. This means that states can reduce their diabetes-related Medicaid spending by covering this kind of treatment for adults.
- The average medical costs for patients with diabetes who received appropriate oral health care were \$1,799 lower than the costs for patients who had not received this care.
- Florida could save up to \$26 million each year by ensuring that adults with diabetes on Medicaid receive treatment for gum disease at the same rate as those with private dental insurance.

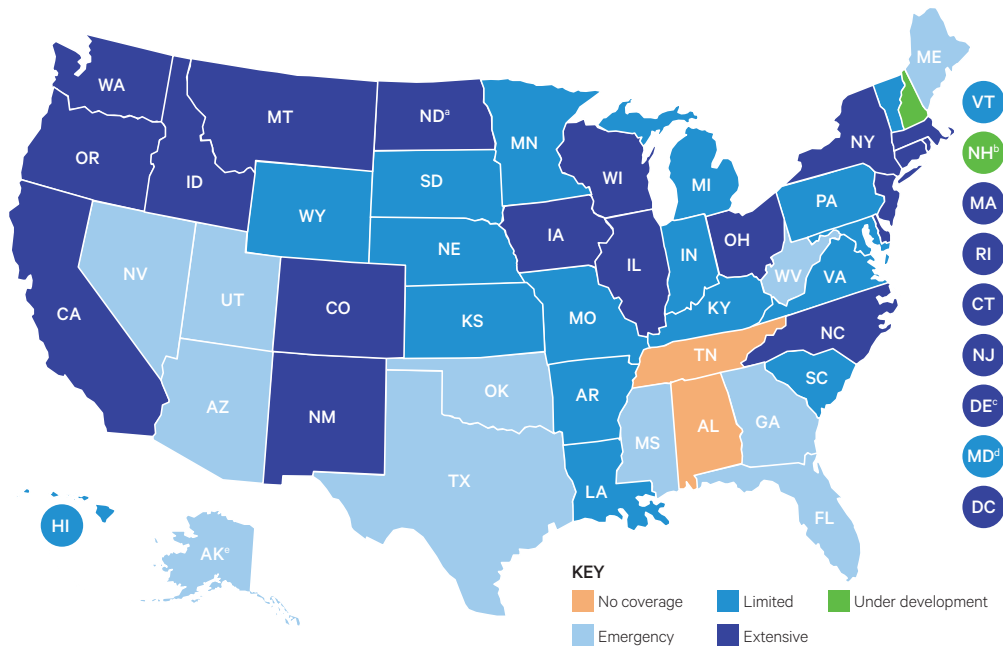
7. Children may be more likely to get dental care if their parents do.

- By offering robust dental coverage for adults, states can send a strong message about the importance of oral health — and its link to overall health.
- Researchers in Connecticut found that Medicaid-enrolled children were 29% more likely to receive preventive dental care when their parents had received such care.

III. Adult dental coverage in the 50 states

Focus group research suggests that policymakers and policy influencers — those who engage in advocacy activities — may find state-to-state comparisons persuasive. For example, if adjoining states offer more comprehensive Medicaid adult dental benefits, this information is worth sharing. In addition, if your state is one of the handful that offer emergency-only dental services, this should be noted.

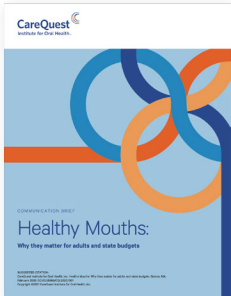
For these and other reasons, this 50-state map indicates the oral health services that each state provides to its adult Medicaid members.



- ^a North Dakota does not offer adult dental benefits to its Medicaid expansion population.
- ^b Under New Hampshire's bill the Department of Health and Human Services is directed to develop a "comprehensive plan to ensure that Medicaid recipients can safeguard their smiles and their overall health."
- ^c During the 2019 session, Delaware passed legislation authorizing a full adult dental Medicaid benefit.
- ^d Maryland offers treatment for symptoms in emergency situations but does not cover emergency surgery. Dual-eligible adults have coverage for a broader set of dental services.
- ^e Alaska's state budget was passed keeping adult dental coverage intact; however, the Governor's line item vetoes in the budget will result in cuts to the state's Medicaid program, including adult dental, unless the legislature moves to rescind them.

State Medicaid Coverage of Adult Dental Benefits, January 2020

IV. Resources to Review or Share With Policymakers

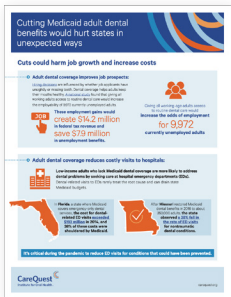


[Healthy Mouths: Why They Matter for Adults and State Budgets](#)

DentaQuest Partnership for Oral Health Advancement (2020)

This communications brief explains why dental coverage is so important for adults and states. The brief points out that low-income adults are visiting

hospital emergency departments for dental issues at a rate that is two and a half times higher than might typically be expected. This strengthens the case that these visits are linked to the lack of comprehensive Medicaid adult dental benefits in most states. This brief shares national data as well as data from the states of Hawaii, Maryland, Missouri and Tennessee.

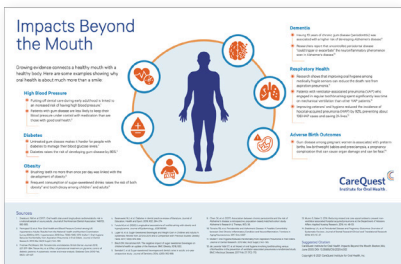


[Cutting Medicaid Adult Dental Benefits Would Hurt States in Unexpected Ways](#) (infographic)

DentaQuest Partnership for Oral Health Advancement (2020)

As this infographic shows, it can be easy to overlook the ways in which cutting Medicaid adult dental benefits

could hurt states. One example is job growth. Many employers' hiring decisions are shaped by whether an applicant has unsightly or missing teeth. This infographic cites examples from two states to make the case for why states stand to benefit when dental coverage for lower-income adults is preserved or achieved.



[Impacts Beyond the Mouth](#) (infographic)

DentaQuest Partnership for Oral Health Advancement (2020)

Growing evidence connects a healthy

mouth with a healthy body. This infographic highlights how oral health is linked with high blood pressure, diabetes, obesity, dementia, respiratory health, and adverse birth outcomes. This is an excellent document to share with policymakers and other stakeholders.

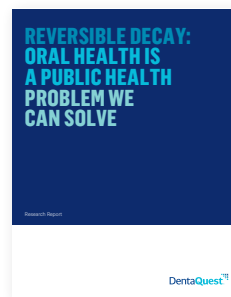


[Protecting and Expanding Access to Oral Health in 2020: Learning from State Trends in Medicaid Adult Dental Coverage](#)

Families USA (2020)

In this policy paper, Families USA explains why educating policymakers and the public can pay dividends in

expanding dental coverage. This paper summarizes the five states that recently expanded access to dental coverage for adults who rely on Medicaid for their insurance.



[Reversible Decay: Oral Health Is a Public Health Problem We Can Solve](#)

DentaQuest (2019)

Six out of 10 U.S. adults rate their oral health as fair or poor, and half (51%) of adult patients are concerned about their oral health — rating it as a bigger health concern over heart, eye, digestive,

mental, and skin health. High costs and lack of coverage are significant barriers to getting oral health care. Most dentists (98%) and physicians (96%) agree that access to preventive dentistry is key for improving overall health. Most Americans support Medicare dental (80%) and Medicaid dental (78%) coverage.

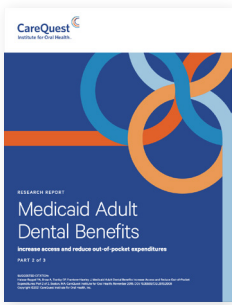


[Poor Families Spent 10 Times More of Their Income on Dental Care than Wealthier Families](#) (Part 1 of 3)

DentaQuest Partnership for Oral Health Advancement (2019)

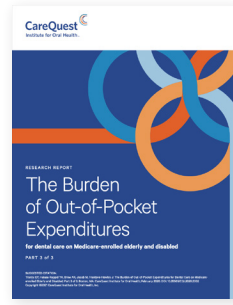
This research report shows why dental coverage is so important for lower-income Americans. While 58% of

high-income people have unmet dental needs, 93% of individuals living in poverty have unmet dental needs. And high-income Americans are roughly twice as likely to utilize dental services as those living in poverty. Those in poverty spend 10 times more of their annual family income on dental services compared to those living in high income families.



[Medicaid Adult Dental Benefits Increase Access and Reduce Out-of-Pocket Expenditures \(Part 2 of 3\)](#)
DentaQuest Partnership for Oral Health Advancement (2019)

This research report shows how Medicaid dental benefits significantly improve adults' access to and utilization of oral health services. The average annual out-of-pocket cost for dental care was \$196 for those covered by Medicaid, \$283 for those with private medical coverage, and \$466 for those who lack medical coverage.



[The Burden of Out-of-Pocket Expenditures for Dental Care on Medicare-enrolled Elderly and Disabled \(Part 3 of 3\)](#)

DentaQuest Partnership for Oral Health Advancement (2020)

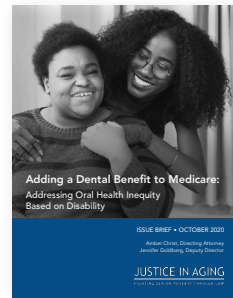
Although this toolkit focuses on Medicaid, this report shows how the lack of a mandated dental benefit in Medicare significantly contributes to poor health among America's elderly and disabled populations. Among all Medicare or Medicare Advantage recipients, at least 75% of total dental costs were paid for out-of-pocket. This contributes to financial strain that can force older adults to choose between dental care and other health services they need.



[Estimating the Cost of Introducing a Medicaid Adult Dental Benefit in 22 States](#)

American Dental Association, Health Policy Institute (2016)

Most visits by adults to hospital emergency departments (ED) are for dental conditions that could have been addressed in a dental office, but many adults lack dental coverage. Examining the 22 states which then lacked a comprehensive Medicaid adult dental benefit, this 2016 research brief explains that these states' Medicaid programs paid roughly \$520 million for ED visits for dental conditions. The brief contends that diverting this money toward an extensive Medicaid adult dental benefit in these states would go a long way in covering the estimated cost of providing this benefit.



[Adding a Dental Benefit to Medicare: Addressing Oral Health Inequity Based on Disability](#)
Justice in Aging (2020)

Roughly 8.6 million adults with disabilities under age 65 receive health coverage from Medicare. Many of these adults are dually enrolled in Medicare and Medicaid. This report by Justice in Aging explains why the lack of dental coverage in Medicare puts these adults at greater risk of poor oral health.

CareQuest

CareQuest Institute for Oral Health is a national nonprofit championing a more equitable future where every person can reach their full potential through excellent health. We do this through our work in grantmaking, research, health improvement programs, policy and advocacy and education as well as our leadership in dental benefits, care delivery and innovation advancements. We collaborate with thought leaders, health care providers, patients and local, state and federal stakeholders, to accelerate oral health care transformation and create a system designed for everyone. To learn more, visit carequest.org.

This report and others are available at carequest.org.