

## The League of Women Voters of Delaware Supports

## DENTAL COVERAGE FOR ADULT MEDICAID RECIPIENTS

The League of Women Voters of Delaware supports coverage of dental care for adult Medicaid recipients. This is based on the position of the League of Women Voters of the US to provide access to a basic level of health care for all U.S. residents while controlling health care costs.

**Prior legislation:** Legislation was introduced in the 148<sup>th</sup> Session to authorize Medicaid to offer dental coverage to adult recipients for urgent and preventive care up to a \$1,000 annually with a \$10 co-pay and allowed for another possible \$1,500 per individual for urgent dental care if approved by DHSS. (Dental care for children is already part of the Medicaid service package.) Though the proposal did not pass, the need remains. We know that funds are tight, but the practical aspect cannot be ignored: spend modestly for preventive care to avoid far more expensive acute care treatment.

<u>Importance of Dental Care</u> The need for dental care has been well documented, but its cost often means it is treated as discretionary. Adults with limited resources may choose to do without it, paving the way for serious health problems.

Research is ongoing to document the many ways that the lack of dental care affects the body. It can affect the skin, the central nervous system, the gastrointestinal tract, and the body's cardiac system.<sup>1</sup> The range of diseases that can be caused or affected by infections in the mouth include diabetes, heart disease, stroke, acute bronchitis, and pneumonia.<sup>2</sup>

**Economic and Social Impact:** As a practical matter, preventive care for the teeth and gums makes good sense for tax payers. It could keep more serious – and costly – diseases from developing or progressing more rapidly, thereby saving Medicaid dollars in the long run.

It also makes sense for the individual. Good oral health can make all the difference in a person's ability to get and keep a job. First, it can affect the ability to speak clearly – and poor communication can close the doors to many jobs.<sup>3 4 5</sup> Complications associated with untreated dental caries and periodontal disease can also result in an unsightly appearance, which is often cause for the failure to be hired. But, even for those who do find a job, dental pain can make for poor performance, stemming from difficulty concentrating on daily tasks and, once serious health problems develop, excessive absenteeism.<sup>6 7</sup>

The effects of dental disease can also impact such every day activities as eating and sleeping. Plus, it can create barriers to normal human interaction, making an individual unwelcome in social settings.<sup>8 9</sup> While such impacts may seem insignificant, a fulfilling life is made up of an accumulation of just such matters.

<sup>4</sup> Seirawan, H., Sundaresan, S., & Mulligan, R. (2011). Oral health-related quality of life and perceived dental needs in the United States. *Journal of Public Health Dentistry* 71:194-201

<sup>&</sup>lt;sup>1</sup> Centers for Disease Control and Prevention (2011). *Oral health: Preventing cavities, gum disease, tooth loss, and oral cancers: At a glance 2011.* Atlanta: CDC.

<sup>&</sup>lt;sup>2</sup> U.S. Department of Health and Human Services (2000). *Oral Health in America: A Report of the Surgeon General*. Rockville, MD. National Institute of Dental and Craniofacial Research, National Institutes of Health.

<sup>&</sup>lt;sup>3</sup> Ibid.

<sup>&</sup>lt;sup>5</sup> Institute of Medicine (2013). Oral Health Literacy. Washington, DC: The National Academies Press.

<sup>&</sup>lt;sup>6</sup> Benjamin, R. M. (2010). Oral health: The silent epidemic. Public Health Reports, 125, 158-159

<sup>&</sup>lt;sup>7</sup> The Medicaid and CHIP Payment and Access Commission (MACPAC) (June 2015). *Medicaid Coverage of Dental Benefits for Adults,* Chapter 2

<sup>&</sup>lt;sup>8</sup> Dubay, K.L., Parker, A., & DeFriesel, G.H. (2005). Assuring the accessibility of basic dental care services: issues of workforce supply, organization of care, and education. *North Carolina Medical Journal* 66, no. 6: 430-437

<sup>&</sup>lt;sup>9</sup> Kaiser Commission on Medicaid and the Uninsured (2012). *Oral health and low-income nonelderly adults: A review of coverage and access*. Washington, D.C. Kaiser Family Foundation