



## ORAL DISEASE: THE SILENT EPIDEMIC

“Oral health is essential to the general health and well-being of all Americans *and* can be achieved by all Americans. In spite of the safe and effective means of maintaining oral health that have benefited the majority of Americans over the past half century, many among us still experience needless pain and suffering, complications that devastate overall health and well-being, and financial and social costs that diminish the quality of life and burden American society.”

Oral Health in America: A  
Report of the Surgeon General,  
2000



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# Kansas Facts:

## Medicaid Coverage for Adult Dental Services

### FACTS

- The Medicaid program serves the most vulnerable—those with disabilities, mental illness, frail elderly, highly impoverished and pregnant mothers living in poverty.
- Currently, Medicaid covers only *emergency* dental services for adults (and only for conditions that threaten the health of the person, such as extraction of infected teeth).
- Many adults receiving Medicaid are forced to use the hospital emergency room for otherwise avoidable dental health issues.
- Comprehensive dental services for adults receiving Medicaid would prevent pain, suffering and the high cost of hospitalizations and advanced disease that result from delayed care.
- Among services provided to Medicaid recipients, comprehensive dental care is *not* among them.
- If an adult Medicaid recipient has dental need, it must be ignored or paid out-of-pocket.
- Federal Medicaid regulations allow each state to decide whether to provide dental services.

### EVIDENCE OF NEED

#### **Kansas Mission of Mercy (KMOM):**

Out of nearly 1,800 patients served at the free dental clinic in Wichita in January 2006:

- Nearly 87% were adults, which was a higher percentage than at previous KMOM clinics. (KHI cited one reason for this may be the increased number of children enrolled in HealthWave, which offers dental coverage.)
- 85% had no insurance
- More than half reported having pain prior to attending KMOM, and nearly half of them reported having pain for more than one month.
- 58% reported it had been 2 or more years since seeing a dentist
- 94% of patients who had not seen a dentist within the past 6 months cited having no dental insurance/inability to pay as the reason

\*Information taken from Kansas Health Institute's (KHI) analysis and summary of patient exit surveys, May 2006.

#### **Kansas Association of Medically Underserved (KAMU):**

Out of 35 clinics that serve more than 122,000 clients in 36 communities:

- 14 provide dental care
- Often, there are up to three month waiting periods
- Some patients drive over 150 miles to receive services



# Adult Medicaid Dental

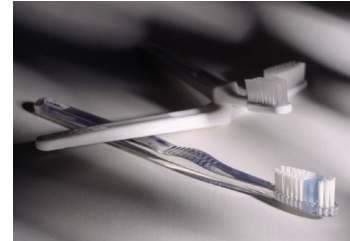
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## ECONOMIC IMPACT

- Employed adults lose more than 164 million work hours each year due to dental disease, its associated pain, or dental visits.
- Evidence suggests that some employers are less likely to hire individuals whose appearance is affected by dental disease or disorders.
- In Sedgwick County alone, it is estimated that 3,000 emergency room visits occur each year for individuals seeking relief of dental pain.
- The Institute of Medicine estimates that \$4 billion a year is saved through preventive dentistry.

## OVERALL HEALTH IMPACT

- Oral infections have been associated with diabetes, heart disease/stroke, pre-term birth and low birth weight.
- Cancer in the oral cavity or pharynx account for approximately 2.4% of all cancers. If caught early, an individual's 5-year survival rate from these types of cancers can improve by as much as 29%.
- Oral health affects diet, nutrition, sleep, psychological status, social interaction and work.
- A number of medications, including antidepressants and drugs used to treat epilepsy or other neurological disorders, can cause serious oral side effects.



## PROVIDER NETWORK/CAPACITY



- In 2006, 625 dentists provided services to child beneficiaries of Title 21 (HealthWave) and 342 dentists provided services to child beneficiaries of Title 19 (Medicaid). On average, this is approximately a 40% participation rate by Kansas-licensed dentists.
- The safety net clinics have increased the number of dentists from 5 in 2003 to 21 in 2006, nearly quadrupling dental capacity in the safety net system. (The number of clinics providing care has increased from 4 in 2003 to 14 in 2007.) The safety net clinics have a strategic plan to continue to increase capacity to 37 dentists and 17 dental hygienists by 2009.
- On average, a dentist working in a safety net clinic can provide services to approximately 2,500 patients per year.

## FUNDING REQUIRED TO SERVE ADULTS RECEIVING MEDICAID

*(based on the 2006 Kansas Health Policy Authority Enhanced Budget)*

- Adults receiving services through HCBS PD/DD/HI (physical disability/developmental disability/head injury) waivers: funding approved by 2006 Legislature
- Adults receiving services through HCBS FE (frail elderly) waiver: \$1.3 million SGF (3.3 million AF)
- All other adults: \$2.2 million SGF (\$5.5 million AF)