In the Spotlight: the Current State of Dental Plans

Increasingly, studies show strong links between dental care and overall health. Oral hygiene has been linked to a multitude of diseases like cardiovascular disease, diabetes, osteoporosis, and even Alzheimer’s disease. Despite the strong evidence, dental coverage is not necessarily a given. Below is an overview of trends in dental coverage and how the health reform law affects it.

**Trends in Dental Care**

Dental health insurance plans are often offered separately from medical health insurance, much like vision insurance. As employers continue to feel the pinch of expensive policies and tighter budgets, many are shifting more of the cost of dental coverage to employees. Often, dental coverage is seen as less necessary and many employees are going without. Some deal sites have seen an opening for offering dental services at a deep discount for a limited period of time.

For those who cannot afford dental coverage and forego regular preventive care, dental care can take a costly and painful turn. A February 2012 Pew Center report illustrates a rise in dental-related emergency room visits over the last several years. In fact, the report mentions North Carolina’s most recent data that in 2009 more than 69,000 emergency room visits were attributable to dental issues. The cost of care in emergency rooms is substantially higher than that of regular visits. Affordability of dental care is the main driver of visits to the emergency room—emergency room visits for dental services are known to drop for a short period of time in communities that provide access to free and low-cost acute care through programs such as the NC Dental Health Fund’s Missions of Mercy program, a two day mobile clinic that visits approximately 10 communities a year. The Missions of Mercy program is supported through a grant from the separate and independent BCBSNC Foundation and by volunteer dentists across the state.

Beyond financial access, many individuals have trouble locating a dentist in their geographic area. As with many medical services, people who live in rural areas have a harder time finding needed services. According to a 2011 report, more than 31 million people nationwide were “unserved,” or living in areas without access to a dentist or dental clinic. In North Carolina, **75 of the 100 counties** have fewer than four dentists per 10,000 residents, as illustrated below. This issue is intensified for Medicaid beneficiaries, whom less than half of dentists in 25 states agree to treat, including **North Carolina**.

---

![Dentists per 10,000 Population](image)

What’s Working:
Preventive care is a critical element of oral health. As a part of the Healthy North Carolina 2020 initiative, the North Carolina Division of Public Health has developed targets to increase the number of children on Medicaid who receive dental services. Under a separate initiative, North Carolina has won national attention for its Into the Mouths of Babes (IMB) program. IMB trains and reimburses medical providers to deliver preventive oral health services including evaluation, parent education and fluoride varnish application to high risk Medicaid-enrolled children from the eruption of the first tooth until age three and a-half. While preventing oral disease is the ultimate goal, there is a widespread recognition of a mal-distribution of dentists in the state, which ultimately limits access to treatment and other care. To address the treatment needs of underserved populations, the BCBSNC Foundation supports safety-net dental practices, those with a mission to serve the underserved, by providing technical assistance through consultants who specialize in practice management of the safety net clinic. Through this initiative, Strengthening the Oral Health Safety Net, the Foundation has noted increases in access to care, improvement in quality of care (measured by completion of a patient’s individual treatment plan), and improvements in the financial bottom line of these programs, however many struggle to operate at no financial loss. The challenge of recruiting and retaining dentists to work in these practices has proven to be a limiting factor in this work.

Health Care Reform and Dental
An attempt to improve access to dental care was made in the Affordable Care Act (ACA), even though it was not a primary focus of the law. The Pew Center estimates that ACA will result in 5.3 million additional children who will gain dental insurance. ACA requires all qualified health plans that offer coverage over the state-based Exchanges to cover a standard set of benefits, called “essential health benefits,” that include pediatric oral services. Adult dental benefits can also be offered on the Exchanges, either as a stand-alone policy or as a part of a larger medical benefits package.

Open Questions
There are still questions about what the dental benefits included in ACA will mean. For example, the age of “pediatric” dentistry is in question; the National Association of Dental Plans defines pediatric as age 12 and under. Plans still do not know which specific services will be covered under dental benefits. Basic preventive dental care usually includes an exam, fluoride, and x-rays. The Blue Cross and Blue Shield Association has requested clarification from the Department of Health and Human Services surrounding these issues.

BCBSNC Views
Blue Cross and Blue Shield of North Carolina (BCBSNC) has a long history of supporting prevention and oral health is no exception. BCBSNC sees the most success when we target prevention among the youngest population – even healthier babies when pregnant women utilized dental services prenatally. Dental care, integrated with medical care, as a part of primary health care can lead to generally healthier North Carolinians.

For More Information:

This information has been prepared by Blue Cross and Blue Shield of North Carolina to assist our customers in understanding Health Care Reform. This publication is for information purposes only. It is not legal or tax advice. Please consult with your attorney or tax advisor for further advice. As regulations and other interpretive guidance are published, this information may change. We will continue to work with our customers going forward to provide updates and further assistance. U#7259law