

Putting Teeth in Medicare for All: The Need for Comprehensive Oral Health in Any New Health Coverage Proposals

Affordable oral health care is necessary for all of us to stay healthy and painfree. If efforts to improve the U.S. health system truly want to improve American's health and reduce costs, it is crucial that comprehensive oral health coverage be a core component.

Health care remains a top issue for both voters and policymakers, and many have demonstrated renewed energy for broad health reform. Over a dozen members of Congress have introduced proposals to move the United States toward a more universal health coverage system, and dozens more are looking for smaller fixes to improve the current system. Yet a critical component of health, oral health, is not being adequately addressed.

Poor oral health is linked to diabetes, heart disease, lost school and work hours, and reduced quality of life. Yet, millions of Americans cannot afford the oral health care they need to stay healthy. More than any other health care treatment, people skip dental care



I am now retired, on Medicare and Medicaid... I have lost six teeth which needed unaffordable root canals and crowns.

-Cheryl, Age 73; Olympia, Washington

because they are unable to pay, even more so than for prescription drugs and other medical services.¹ The shortfalls within our current health care system leave millions of people across the country without access to oral health coverage and care:

- Medicare explicitly excludes oral health coverage, leaving millions of seniors and people with disabilities with few affordable options for care.
- Medicaid treats dental coverage for adults as optional for states, including for pregnant women, people with disabilities, and lowincome seniors. Among the states that do offer such benefits, the quality of coverage varies considerably.
- Private coverage also varies widely, with the essential health benefits of the Affordable Care Act (ACA) requiring only that dental coverage be offered to children. There is no requirement to offer any sort of dental benefits to adults, and oral health coverage is often sold separately from medical plans.

Given these shortfalls, it is crucial that comprehensive oral health coverage be a core component of any effort to improve the U.S. health system. Unfortunately, most of the current proposals do not go far enough to ensure that oral health would be adequately addressed. Currently proposed health reform bills fall under five major categories, which require varying considerations for oral health²:

Medicare for All: The option that has gotten the most attention from the media and the public would create a single national health insurance program for all U.S. residents. If designed well, Medicare for All could address oral health — but, to do so, it must explicitly cover comprehensive oral health care and treat it in the same way as the rest of covered services.

Medicare Buy-In: This option would allow Americans who are not yet eligible for the current Medicare program to purchase Medicare coverage. Typically, these proposals allow people of a certain age to buy in. Because Medicare buy-in proposals are based on the current Medicare framework and do not change its benefits, they will exclude oral health coverage completely unless it is addressed explicitly. To adequately address whole-person health with this option, oral health would need to be added to Medicare Part B.

Public Plan Option: This option would create a new public plan that would be offered as a choice to individuals through the ACA marketplace. Typically, the benefits in these proposals are based on the ACA

essential benefits, which provide dental coverage only for children. This type of proposal would need to include a revision of the ACA health benefits to include adult dental coverage or an alternative comprehensive benefit package that addresses dental health.

Public Program with Opt-Out: These proposals would offer a new national health insurance program for all U.S. residents, with an option to opt out of qualified coverage. This type of program would need to offer a comprehensive dental benefit as part of the new program.

Medicaid Buy-In: A Medicaid buy-in option would allow states to offer a Medicaid coverage plan for individuals to purchase through the ACA marketplace. Typically, a state would be allowed to offer a plan that meets the requirements of a Medicaid Alternative Benefit Plan, which must include ACA essential benefits and meet other Medicaid standards. To be truly comprehensive, these proposals would need to include comprehensive dental coverage for adults as well as children in Medicaid, the ACA's essential health benefits, and the buy-in plan.

Oral health impacts many aspects of everyone's overall well-being and prosperity, yet dental care remains out of reach for many people in America. Whether policymakers are considering sweeping reforms to the health care system or smaller fixes for current programs, it is critical that oral health be addressed.

¹ The Board of Governors of the Federal Reserve System. "Report on the Economic Well-Being of U.S. Households in 2017." May 2018. <u>https://www.federalreserve.gov/publications/files/2017-</u> report-economic-well-being-us-households-201805.pdf.

² Henry J. Kaiser Family Foundation, "Compare Medicare-for-all and Public Plan Proposals." May 15, 2019. <u>https://www.kff.org/</u> interactive/compare-medicare-for-all-public-plan-proposals/. FAMILIESUSA

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