

WHY ADULTS WITH DEVELOPMENTAL DISABILITIES SHOULD RECEIVE COMPREHENSIVE DENTAL CARE

ADULTS WITH DEVELOPMENTAL DISABILITIES EXPERIENCE



Greater unmet health care needs than the general population (1)



Unequal access to health care services (1)



Greater barriers to obtain education (1)



Lower employment rates (1)



Higher poverty rates (1)



The need for sensory and behavioral supports (1)

OVER-DEPENDENCE OF EMERGENCY DEPARTMENT (ED) ROOMS FOR ADDRESSING DENTAL NEEDS



On average, every 15 seconds, someone visited a hospital ED for dental conditions in 2016 (3).



2.2 million total number of hospital ED visits for dental conditions in 2016 (3).



\$2.7 billion dollars spent on hospital ED visits for dental conditions in 2017 (3).



25% of adults who were treated in hospital EDs returned within a year with a similar dental complaint (4).

Dental care is the #1 unmet health need among adults with developmental disabilities (2).

PREVENTION IS KEY

Studies have shown that for every dollar spent on preventive dental care - \$8 to \$50 can be saved in restorative and emergency treatments - and potentially more in additional types of medical treatment (5).



A reduction of 1% in all dental claims for ED users for dental condition could lead to a savings of \$6.1 million based on an average expense per ED user of \$637 per visit for non-traumatic dental conditions (6).



Those who practice good preventive oral health care can save 31% in dental costs over 5 years. Likewise, adults who don't receive preventive care can expect a 43% increase to their annual dental costs over the same period of time (4).



Adults with disabilities are 4x more likely to report their health to be only fair or poor than people without disabilities. More specifically, adults with developmental disabilities are at risk for multiple health problems including poor oral health (7).

Oral health is linked to overall health, disease in the mouth can spread to other parts of the body. Poor oral health is associated with other chronic conditions as well as increased behavioral issues including but not limited to (8,1):



Obesity



Elopement



High Blood Pressure



Aggression



Heart Disease



Depression



Alzheimer's Disease



Diabetes



Refusal to Eat

ACTIONS TO PROMOTE CHANGE

1

Provide comprehensive dental services, including anesthesia, for adults with intellectual/developmental disabilities in the Medicaid Home- and Community-Based Services Waiver Program and an allocation for Intermediate Care Facilities for Developmental Disabilities (ICF/DDs).

2

Provide enhanced pre- and post-doctoral special needs dentistry education program, including a parent/family and behavioral health components at the LSU School of Dentistry to train dental students and the existing dental workforce in order to build capacity and competency in public and private practice.

3

Increase the number of hospitals and outpatient surgery centers available for dental procedures by making dental equipment available to dentists in area hospitals and outpatient surgery centers for use by public and private practitioners.

DENTAL CARE DISPARITIES COMPARISON

ROUTINE PREVENTIVE CARE

Adult with Intellectual/Developmental Disabilities

\$199.92-
\$272.92

Includes: Dental Exam, X-Ray and Cleaning with or without in-office sedation

General Adult Population

\$199.92

Includes: Dental Exam, X-Ray and Cleaning

Adults with Intellectual/Developmental Disabilities with Aversions

\$3,649.62

Includes Dental Exam, X-Ray and Cleaning and required (2015):

- General anesthesia (approx. 60 mins)
- Hospitalization
- Diagnostic tests and labs

General Adult Population

\$199.92

Includes: Dental Exam, X-Ray and Cleaning

Adults with Intellectual/Developmental Disabilities with Aversions WITHOUT COMPREHENSIVE COVERAGE OR DENTAL CARE

\$10,000 -
\$500,000

Includes: Multiple Emergency room visits, multiple Hospitalizations, Wound care for infections and abscess, Labs and x-rays, additional direct support worker hours, **urgent and more extensive dental care still needed.**

Adults with I/DD with Aversions WITH COMPREHENSIVE COVERAGE THROUGH MEDICAID WAIVER PROGRAM and ALLOCATION TO ICF/DDs

** Costs are a range from a sample of 10 claims.*

\$155.55

Preventive Care
WITHOUT Anesthesia

\$635.19 -
\$739.13

*Preventive Care **WITH**
Anesthesia

\$603.46 -
\$3,681.50

*Restorative Care
WITHOUT Anesthesia

\$1,097.94 -
\$4,205.68

*Restorative Care **WITH**
Anesthesia

PREVENTIVE CARE includes: Dental exam, x-rays, and cleaning as well as anesthesia, hospitalization, diagnostic tests, and labs when required.

RESTORATIVE CARE includes: Fillings, extractions, crowns, root canal, etc. as well as anesthesia, hospitalization, diagnostic tests, and labs when required.

CITATIONS

1. DentaQuest Partnership for Oral Health Advancement (July 16, 2020). "Barriers to Dental Access for Special Needs Patients: DentaQuest Partnership Continuing Education." <https://www.dentaquestpartnership.org/system/files/DQP%20July%2016%20Webinar%20-%20Special%20Needs%20Dentistry.pdf> Citations
2. Well-Ahead Louisiana (2019). "Oral Health: At A Glance." http://wellaheadla.com/Portals/0/Oral%20Health/_Oral%20Health%20at%20a%20Glance_FINAL.pdf?ver=2020-04-23-092439-440
3. Health Policy Institute American Dental Association (April 2020). "Emergency Department Visits For Dental Conditions - A Snapshot." https://www.ada.org/-/media/ADA/Science%20and%20Research/HPI/Files/HPIgraphic_0420_1.pdf?la=en
4. Families USA (July 2018). "Treating Pain Is Not Enough: Why States' Emergency-Only Dental Benefits Fall Short." Washington, D.C. https://familiesusa.org/wp-content/uploads/2019/09/OH_Emergency-Oral-Health_Issue-Brief.pdf#:~:text=Treating%20Pain%20is%20Not%20Enough%3A%20Why%20States%E2%80%99%20Emergency-Only,provides%20to%20adults%20varies%20from%20state%20to%20state.
5. University of Illinois Chicago College of Dentistry (November 2016). "The Value of Preventative Oral Health Care." <https://dentistry.uic.edu/news-stories/the-value-of-preventive-oral-health-care/>
6. Okunseri C. There are more than 1.3 million emergency department visits and charges of \$1 billion annually due to nontraumatic dental conditions in the united states. Journal of Evidence Based Dental Practice. 2015;15(1):33-34. <http://www.sciencedirect.com/science/article/pii/S15323358214002826>. <https://doi.org/10.1016/j.jebdp.2014.12.002>
7. National Council on Disability (2017, Fall). "Neglected for Too Long: Dental Care for People with Intellectual and Developmental Disabilities." <https://ncd.gov/publications/2017/dental-issue-brief>
8. Centers for Disease Control and Prevention (November 2020). "Oral Health Conditions." <https://www.cdc.gov/oralhealth/conditions/index.html>