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Ending dental coverage for low-income adults costs taxpayers

Routine, preventive dental care saves money and improves health

SEATTLE - The Washington Legislature's decision two years ago to eliminate non-emergency dental benefits for nearly 450,000 adults helped balance the budget. But it was a costly decision because the uninsured often turn to already overburdened emergency rooms, creating costs that are passed on to taxpayers and other healthcare consumers.

If state lawmakers restore the dental benefits in next year's legislative session, it would shift the state's focus from expensive treatment to more cost-effective preventive care and improve hundreds of thousands of lives. Community health centers and other dental clinics could provide the routine, preventive care necessary to help patients avoid the severe problems that lead them to costly emergency rooms.

In the current weak economy, uninsured patients are already struggling to pay for basic necessities. Most can't afford preventive oral health care. When adults do not receive regular dental care, routine problems like cavities deteriorate into severe infections and lost teeth. Untreated dental problems cause needless pain and suffering, threaten overall health and increase healthcare costs.

"We see a steady stream of patients coming into the emergency department with dental problems, most of which are not true emergencies," said Dr. Brian Livingston, vice president of medical affairs for Swedish Medical Center/First Hill in Seattle. "We can try to alleviate the pain, but we aren't dentists. We can't address the underlying problem or provide the vital preventive care that would significantly decrease the number of emergency dental visits."

Across Washington, public health departments and community clinics are straining to find resources to provide dental care for uninsured patients. With few options, these patients have little choice but to rely on hospital emergency rooms, where doctors can only treat the pain, not fix the problem. It is an expensive option. Over a recent 18-month period, there were 54,000 dental-related visits to Washington ERs, costing more than \$36 million, with \$7.6 million in King County alone. A leading reason uninsured and Medicaid patients visit an ER in Washington is for a dental problem, according to data from the Washington State Hospital Association.

"Since the cut in 2011 to the Medicaid program, we have provided much more emergency care," said Dr. Sarah Vander Beek, a dentist who treats low-income patients at Neighborcare's Rainier Beach Medical and Dental Clinic in South Seattle. "Unfortunately, we are treating dental disease when it's more advanced, complex and expensive. What could have been a filling is now an extraction."

Every day, patients walk into the emergency room at PeaceHealth St. John Medical Center in Longview with serious dental pain - more than a thousand every year. Many come to the ER in agony, with swollen faces, rampant decay and sometimes life-threatening infections, representing lost opportunities to catch dental disease early. If the state restores Medicaid dental benefits to cover preventive care, the savings could be staggering, according to Dr. Brian Hoyt, medical director of the St. John Medical Center emergency department.

These potential savings extend well beyond dental treatment because poor oral health is linked to serious chronic health problems, such as heart disease, stroke and diabetes. Among diabetics, for example, treating periodontal disease can help control blood sugar levels and avoid costly hospitalizations and medical complications such as blindness, amputation, heart disease, and hypertension. Research shows dental care for diabetics could create substantial savings for patients and the state. For example:

- When diabetics receive regular dental care overall medical costs are cut, on average, by \$3,200 a year per patient.
- When individuals with diabetes receive good oral health care, hospitalization costs can be cut by 61 percent in the first year. In one year, more than 76,000 diabetics were hospitalized in Washington, costing \$1.5 billion.

When state lawmakers eliminated dental benefits two years ago, they lost an opportunity to realize these savings. Their decision took away coverage from an estimated 60,000 Washington residents with diabetes who are enrolled in Medicaid. A failure to provide dental care to low-income populations, especially those with chronic diseases, such as diabetes, costs the state and taxpayers millions in additional, expensive treatment. If legislators wait to restore these dental benefits the problem will only become worse.

“We’re spending two, three or even four times the amount to treat these patients on an emergency basis, instead of focusing on the preventative care to avoid the problems in the first place,” said Dr. Hoyt.

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About the Washington Dental Service Foundation

Washington Dental Service (WDS) Foundation, a non-profit funded by Washington Dental Service, the leading dental benefits company in Washington State, is dedicated to significant, long-lasting improvements in the oral health and overall health of Washington’s young children and seniors. WDS Foundation works to prevent oral diseases such as tooth decay and gum disease, promote early intervention and advocate for effective oral health policies. For more information, visit: www.oralhealthwatch.org.