

JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

Connecting Older Adults to Oral Health

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Justice in Aging is a national organization that uses the power of law to fight senior poverty by securing access to affordable health care, economic security, and the courts for older adults with limited resources.

Since 1972 we've focused our efforts primarily on populations that have traditionally lacked legal protection such as women, people of color, LGBT individuals, and people with limited English proficiency.

Diversity, Equity, and Inclusion

To achieve Justice in Aging, we must:

- Acknowledge systemic racism and discrimination
- Address the enduring negative effects of racism and differential treatment
- Promote access and equity in economic security, health care, and the courts for our nation's low-income older adults
- Recruit, support, and retain a diverse staff and board, including race, ethnicity, gender, gender identity and presentation, sexual orientation, disability, age, economic class

Agenda

- Why Oral Health Matters
- Coverage Options
- Other Resources
- Discussion

Older Adults Access to Oral Health

- 65% of Medicare beneficiaries have NO dental coverage
37 million people
- Nearly 50% did not visit the dentist in last year
- Major disparities based on race, income, disability, rural versus urban
 - 71% of Black & 65% of Hispanic Medicare beneficiaries did not see dentist in last year (versus 43% white)
 - 70% with income below \$10K (versus 27% with \$40K)
 - 62% of beneficiaries under 65 with a disability
 - 59% in rural region (versus 46% in metro areas)
- Cost is biggest barrier to care

<https://www.kff.org/medicare/issue-brief/drilling-down-on-dental-coverage-and-costs-for-medicare-beneficiaries/>

San Diego Seniors & Oral Health

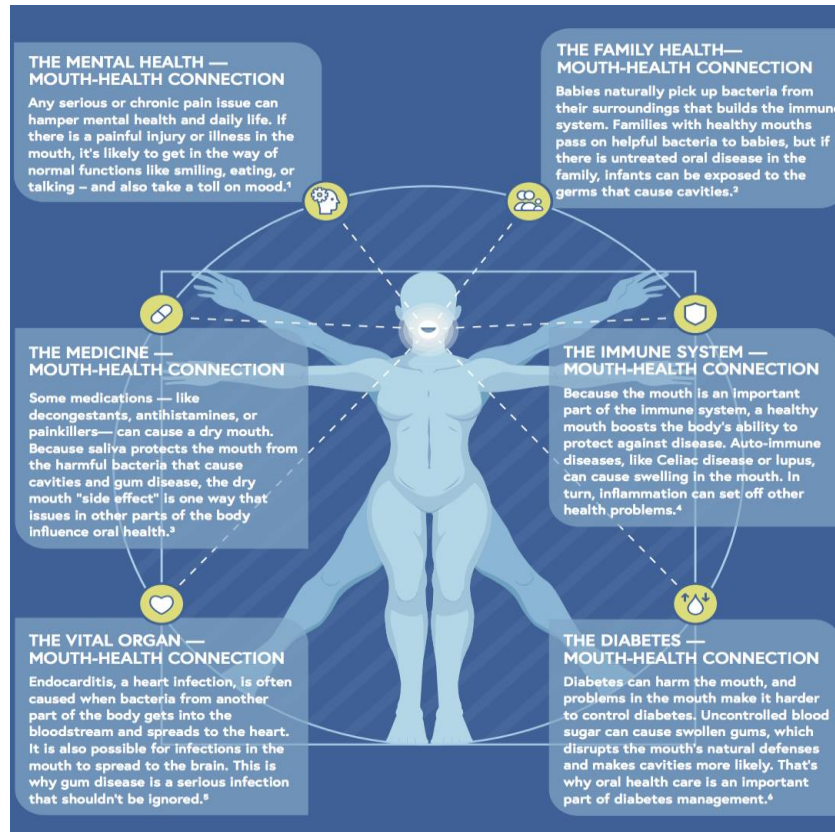
- 374,000 older adults in San Diego
- 96,633 Medicare & Medi-Cal dually enrolled
- No county-level data on seniors
- San Diego Oral Health Coalition
- Statewide:
 - Medi-Cal Dental: ¼ had an annual exam; 14% preventive; 18% any dental treatment
 - Nursing homes: 1/3 have lost all teeth; 1/3 need immediate gum treatment; 48% have untreated tooth decay

Oral Health Matters

Oral health and overall health are linked

- 15% of older adults have no natural teeth
- Periodontal disease = increased risk for infections & hospital admissions for aspiration pneumonia, & exacerbates chronic conditions
- Older adults take more medications that cause dry mouth that worsen oral health

It's All Connected



Data Collection!

- Assess unmet needs – by region, residence type (e.g. community versus institutional); race, ethnicity

Older Americans Act Funding

- Senior centers and other OAA funded organizations can conduct oral health screenings
- Need funding
- Referral processes

AB 2207 Requirements

- Dental screening in health assessment
- Ensure that members are referred to an appropriate Medi-Cal dental provider
- Identify plan liaisons available to dental managed care contractors and dental fee-for-service contractors to assist with referrals to health plan covered services

WIC sec. 14149.8(g)

Other Health Plan Best Practices

- Include oral health questions in HRA
- Education of health plan (internal)
 - Member Services
 - Care Coordinators
- Develop relationships with dental providers accepting patients (& Dental Managed Care Plans in LA & Sacramento Counties)
- Educate entire provider network
 - Oral health importance and referral process
 - Medi-Cal Dental Program case management program
https://www.denti-cal.ca.gov/DC_documents/providers/provider_bulletins/Volume_34_Number_2_3.pdf

- Outreach to members on their oral health benefits
 - Mailings
 - Telephone hold line
 - Initial plan onboarding
- Include oral health in chronic disease prevention and health promotion activities of the plan
- Provider application of fluoride varnish

Providers

- Increase enrollment in Medi-Cal Dental
- Utilize other provider types: e.g. RDHAPs

Don't forget Nursing Homes

- **Facilities are directly responsible for the oral health needs of their residents**
- Required to assist residents in obtaining both **routine** and **24-hour emergency dental care**. These needs and how they are to be addressed must be included in the care planning process
 - Required to have a contract arrangement with a dentist or employing a staff dentist.
 - If resident unable to pay for dental services, facility required to attempt to find alternative care or funding.
 - Required to ensure access to routine care; and if necessary or requested, assist resident in making dental appointments & arranging transportation to and from dental services.

Supporting Federal Opportunities for Advocacy

Adding a Dental Benefit to Medicare Part B

- Integrates oral health into medical benefit – treated the same way as other health services in Medicare
- Payment structure would look the same (e.g. 20% co-insurance; preventive services no co-insurance)
- Provider payment would be adjusted by region and subject to annual stakeholder comment like other services under Part B
- Low-Income Protections would apply to help pay for out-of-pocket costs

Opportunities for Advocacy

Legislative Efforts

- Statutory changes to the Social Security Act must be made to add dental to Medicare
 - Removal of the exclusion for dental services
 - Definitions added
- 2019 Legislation
 - Medicare Dental Benefit Act of 2019 (Cardin, S. 22)
 - Companion House Bill Medicare Dental Benefit Act of 2019 (Barragan, HR 2951)
 - Medicare Dental, Vision & hearing Benefit Act of 2019 (Doggett, HR 1393)
 - Seniors Have Eyes, Ears, and Teeth Act (Roybal-Allard, HR 576)
 - Medicare and Medicaid Dental, Vision, and Hearing Benefit Act of 2019 (Casey, S. 1423)

Opportunities for Advocacy

Medically Necessary Dental Advocacy

- Administrative Advocacy with CMS to expand scope of when Medicare can pay for dental services that are integral to an underlying medical condition or procedure
 - Example: car accident in which the jaw was broken and several teeth lost. Medicare paid for reconstruction of the jaw, but refused to pay for extractions of teeth and the crowns to save the teeth he had damaged.
- Over 115 orgs have signed onto community statement for CMS to change interpretation of policy
- House and Senate Letters to CMS last fall
- Meeting with HHS/CMS to change policy

Beneficiary Pamphlet

YOUR DENTAL SERVICES THROUGH MEDI-CAL

Did you know:

- Your dental health is connected to your overall health.
- Prevention is better than treatment.
- Early care could mean less pain, lower expenses, and less harm to your overall health!

This brochure gives you an overview of what you need to know about the dental services available to adults through Medi-Cal.

CONTACT US!
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USING YOUR DENTI-CAL

If you have full-scope Medi-Cal, you also have dental coverage called Denti-Cal.

- 1 MAKE AN APPOINTMENT**
You can find a list of Denti-Cal providers by going to this website (<http://bit.ly/Medi-CalDentist>) or calling 1-800-322-4384.
- 2 ASK IF THE DENTIST ACCEPTS DENTI-CAL**
Denti-Cal will only pay for services you receive from a Denti-Cal dentist. If you go to a non-Denti-Cal dentist, you will have to pay for the services you receive.
- 3 REQUEST A QUALIFIED INTERPRETER**
If you do not speak English well, you can call 1-800-322-4384 to request an interpreter. If your dentist does not speak your language, your dentist is required to provide an interpreter for your visit, free of charge.
- 4 ON THE DAY OF YOUR APPOINTMENT**
Bring your:
 - Benefits Identification Card (BIC)
 - Photo Identification Card or Driver's License
 - Denti-Cal Plan Card, if you joined a Denti-Cal planYou do not need to provide any information on your own or your family's immigration status on your appointment.
- 5 PAYMENTS**
Your provider must tell you which services are and are not covered by Denti-Cal. Your Denti-Cal provider cannot charge you for services that are covered by Denti-Cal.
- 6 PAY ATTENTION TO PAYMENT PLANS**
Some dental offices might encourage you to sign up for a payment plan or credit card to pay for services not covered by Denti-Cal. Do not feel rushed to sign up. Be sure to have information explained to you in a language you understand before signing anything.
- 7 ASK YOUR DENTIST**
It is important that you understand your health conditions and your treatment. Ask your dentist these three simple questions (From AskMe3):
 1. What is my main problem?
 2. What do I need to do?
 3. Why is it important for me to do this?

YOUR DENTI-CAL BENEFITS

Beginning January 1, 2018, adults* with full-scope Medi-Cal will have more benefits through Denti-Cal.

*All pregnant women are eligible for full-scope Medi-Cal.

- 1 MAJOR SERVICES COVERED**
 - Initial Exam
 - Cleanings (prophylaxis)
 - Fluoride Treatment
 - X-Rays
 - Fillings
 - Prefabricated Crowns (Resin & Stainless Steel Only)
 - Extractions
 - Root Canals in Front Teeth
 - Full Dentures
 - Full Denture Adjustments & Repairs
 - NEW! Laboratory Processed Crowns
 - NEW! Root Canals in Back Teeth
 - NEW! Partial Dentures
 - NEW! Partial Denture Adjustments, Repairs, and Relines
 - NEW! Periodontics (Scaling and Root Planing)

Learn more about your full benefits by visiting <https://www.denti-cal.ca.gov> or calling 1-800-322-4384

- 2 HOW MUCH IS COVERED BY DENTI-CAL?**
Denti-Cal will provide up to \$1,800 in covered services per year. Your dental provider must check with Denti-Cal to find out if you have reached the \$1,800 limit before treating you. If shown to be medically necessary, dental services can go over the \$1,800 limit.
Some services do not count towards the \$1,800 limit, including dentures, emergency services, pregnancy related services, and services in long term care facilities.
- 3 YOU HAVE THE RIGHT TO APPEAL**
You should receive a notice if service is denied and you have the right to appeal.
- 4 IF YOU HAVE RESTRICTED-SCOPE MEDI-CAL**
If you have restricted-scope (also called emergency Medi-Cal), your dental benefits cover extractions and emergencies only (such as severe pain, fractured teeth, uncontrolled bleeding in the mouth, etc.).

YOUR HEALTH CARE RIGHTS

If you are enrolled in the Medi-Cal and Denti-Cal Programs, you have the right to:

- 1 BE TREATED WITH RESPECT AND DIGNITY**
- 2 GET DENTAL SERVICES**
By an enrolled dentist of your choice.
- 3 REQUEST A QUALIFIED INTERPRETER**
At no charge to you.
- 4 USE PROFESSIONAL INTERPRETERS RATHER THAN YOUR FRIEND OR FAMILY MEMBER**
- 5 TELL SOMEONE IF YOUR DENTAL AND LANGUAGE NEEDS ARE NOT MET**
You can call Denti-Cal at 1-800-322-4384 or the Office of the Ombudsman at 1-888-452-8609 to report any problems.
- 6 GET APPOINTMENTS WITHIN A REASONABLE TIME**
According to the Department of Managed Health Care, from the time that you call and make an appointment:
 - Urgent care appointments should be offered in 3 days.
 - Non-urgent appointments must be provided in 36 working days.
 - Preventive dental appointments must be provided in 60 working days.
- 7 PARTICIPATE IN MAKING DECISIONS REGARDING YOUR DENTAL NEEDS**
- 8 HAVE YOUR DENTAL RECORDS AND PERSONAL INFORMATION BE KEPT CONFIDENTIAL**

<https://advancingjustice-la.org/what-we-do/policy-and-research/health-justice/health-resources>

Additional Resources

- Justice in Aging, www.justiceinaging.org/our-work/healthcare/oral-health/
- Oral Health for Older Adults Advocates Guide, https://www.justiceinaging.org/wp-content/uploads/2018/06/FINAL_Oral-Health-for-Older-Adults-in-California.pdf
- Join California Oral Health Progress & Equity Network (OPEN), <http://www.oralhealth.network/>
- Share Your Medicare Story, www.oralhealth4all.org
- Smile California, <http://smilecalifornia.org/>
- Medi-Cal Dental, <https://www.denti-cal.ca.gov>
- Drilling Down on Dental Coverage and Costs for Medicare Beneficiaries, Kaiser Family Foundation (Mar. 2019), available at <https://www.kff.org/medicare/issue-brief/drilling-down-on-dental-coverage-and-costs-for-medicare-beneficiaries/>
- Creating an Oral Health Benefit in Medicare: A Statutory Analysis, Justice in Aging (Jan. 2019), available at <http://www.justiceinaging.org/wp-content/uploads/2019/01/Creating-an-Oral-Health-Benefit-in-Medicare-A-Statutory-Analysis.pdf?eType=EmailBlastContent&eld=2071568b-2eb3-4b7b-a9ff-da101bff3bfa>
- An Oral Health Benefit in Medicare Part B, It's Time to Include Oral Health in Health Care, Joint White Paper (Jul. 2018), available at <http://www.justiceinaging.org/wp-content/uploads/2018/07/Medicare-Dental-White-Paper.pdf>.

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