

The impact of ACA Medicaid expansion on dental visits: mixed results

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Dental coverage for adults is an optional benefit under Medicaid, one that about half of the states offer. With thirty-one states and the District of Columbia expanding Medicaid eligibility under the Affordable Care Act (ACA), how many more low-income Americans sought dental care?

To answer this question, Dr. Astha Singhal of the Henry M. Goldman School of Dental Medicine (GSDM) and coauthors compared 2010 and 2014 data collected by the Centers for Disease Control and Prevention. The study found that 1.5 million more low-income [adults](#) reported having a dental visit in 2014 than in 2010. Among states expanding Medicaid that offer dental benefits, there was an increase in probability of dental visit among poor adults without dependent children, a group most likely to have gained coverage under expansion.

However, this occurred in conjunction with a decline in dental visits among poor parents, who had enjoyed similar benefits even before the ACA's implementation. These results suggest that the addition of new low-income adults with pent-up dental needs may be straining the limited capacity of dental providers willing to treat low-income patients. Authors recommend that additional policy initiatives may be needed to expand the size of this subset of the [dental care](#) delivery system.

This is the first study examining the effect of states' decision to expand Medicaid under the ACA and how it affected use of dental services among low-income adults. As the future of ACA is uncertain and various repeal and replace proposals are being debated, this study provides important and timely evidence to guide those discussions. The study provides important evidence in support of Medicaid dental benefits for adults, while expanding Medicaid eligibility to low-income adults needs to be complemented by increase in delivery system's capacity to improve their access to dental care.

In summary, low-income adults face significant barriers to accessing dental care, and state Medicaid policies can have an immense impact. Adult dental benefits under Medicaid are optional, but low-income adults in states that choose to provide these benefits have better access to dental care. Moreover, Medicaid expansion improved access to dental care among the target population (low-income childless adults), but more investments are needed in expanding the dental care safety net.

The study is published in *Health Affairs*.

More information: *Health Affairs* (2017). content.healthaffairs.org/content/36/4/723.abstract

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