



Statement for the Record

Senate Committee on Health, Education, Labor, and Pensions

**Hearing on “Examining the Dental Care Crisis in America: How Can We Make Dental Care
More Affordable and More Available?”**

Prepared by Families USA

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Chair Sanders and Ranking Member Cassidy, Families USA would like to thank you and the entire Health, Education, Labor, and Pensions (HELP) Committee for this important and timely hearing, and to offer our sincere appreciation to all of today's witnesses for lifting up the critical need to improve our oral health care system. Oral health care is key to overall health and wellness, employment opportunities, economic stability, and social connectedness. Families USA supports addressing the disparities in access to oral health care and finding solutions to ensure all families have access to affordable and quality oral health.

Oral Health Care is Health Care

The Centers for Disease Control¹ and the World Health Organization² have both declared that oral health is a key indicator of overall health, well-being, and quality of life. Additionally, longstanding evidence shows that poor oral health harms our physical, mental, and economic well-being.

When people cannot access the care they need, oral health problems can prevent them from eating, working, securing employment, and staying healthy. A recent survey of middle-aged adults revealed that nearly four in ten had dental problems within the past two years that caused pain, difficulty eating, and work absences.³

When oral disease goes untreated, people are at a higher risk for diabetes, heart disease, stroke, COVID-19, and even death.⁴ If people already have these health conditions, poor oral health can make them worse. This can be a particularly acute problem for our nation's older adults, over two thirds of whom have untreated gum disease and roughly a fifth of whom have untreated tooth decay.⁵

Additionally, lack of access to oral health care during pregnancy can lead to poor health outcomes for both the mother and baby.⁶ Poor oral health raises the risk of high blood pressure during pregnancy, which can lead to major complications and even maternal death.⁷ It also increases the risk of poor birth outcomes, such as low birth weight or premature birth.⁸ Moreover, children are three times more likely to have dental disease if their mother was not able to receive dental care during pregnancy.⁹

Oral Health Remains Out of Reach

Oral health care is central to overall health, yet for far too many people, access to affordable and high-quality dental care is out of reach. Americans are roughly four times more likely to lack dental insurance than medical insurance, with the greatest rates of uninsurance among racial and ethnic minorities.¹⁰ Without insurance, oral health care is too expensive for many people to afford. For example, the average cost of a root canal is between \$750 and \$1,200.¹¹ Dental care remains the number one medical service families skip due to cost.¹²

Even those with insurance still struggle to afford oral health coverage. Recent polling found that 37% of marketplace enrollees delayed dental care because of the cost, as well as 25% of those with employer sponsored insurance.¹³

These disparities are even greater for communities of color, rural communities, and people with disabilities. Black and non-white Hispanic adults are more likely to face cost barriers to dental care than White adults, and this gap has been increasing over time.¹⁴ Among Black older adults, the

percent of individuals who have lost all their natural teeth is 31% — almost double the national average — with minimal change over the past decade.¹⁵ Additionally, the CareQuest Institute found that Black and Hispanic respondents reported that they had never been to a dentist at more than three times the rate of white respondents.¹⁶

Residents in rural America face major difficulties in access, coverage, and geography that limit their ability to obtain good oral health care. An analysis of 2016 Behavioral Risk Factor Surveillance System data found that 20% of rural older adults have not seen a dentist or visited a dental clinic for more than five years, compared to 14% of non-rural older adults.¹⁷ In rural areas, unmet oral health needs can exacerbate other health problems that are common in these communities — studies show strong links between oral health and diabetes, a disease with much higher mortality rates in rural areas than in more urban locations.¹⁸

Now is the Time for Congress to Act

It is clear that millions of people in America do not have affordable access to oral health care — and are suffering as a result — so it is no wonder that there is broad public support to address this problem. Polling shows that 85% of Americans support federal legislation that helps expand access to dental benefits for all Americans. One poll earlier this year found that 92% supported expanding Medicare to provide a comprehensive dental, vision, and hearing benefit.¹⁹

Congress can and should take action right now to improve affordable access to oral health care. That includes ensuring comprehensive benefits for people who rely on Medicare or Medicaid for their health care, and creating opportunities to improve affordable access to oral care for people who have private insurance as well. One such bill, the *Comprehensive Dental Reform Act of 2024* introduced by Senator Sanders, expands dental coverage through Medicare, Medicaid, the Affordable Care Act, and the Department of Veterans Affairs. Specifically, the bill would finally make oral health an essential health benefit within the Affordable Care Act for adults in the private marketplace. In doing so, it would ensure greater access to oral health coverage for those with private insurance.

Conclusion

Millions of individuals and families lack access to affordable, quality oral health coverage. Congress has both the power and the responsibility to enact policy changes that acknowledge the reality that good oral health is central to overall health and financial stability. We appreciate the focus from Chair Sanders and Ranking Member Cassidy on this critical issue, and we look forward to continuing to work closely with the Finance Subcommittee on Health Care to bring to light the deep disparities in oral health care, to advance solutions to ensure that our health doesn't depend on our wealth, and to finally ensure that oral health care is appropriately treated as equally critical to our overall health and wellbeing as other kinds of medical care.

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- ³University of Michigan Institute for Healthcare Policy and Innovation, “Dental Care at Midlife: Unmet Needs, Uncertain Future,” <https://www.healthyingpoll.org/reports-more/report/dental-care-midlife-unmet-needs-uncertain-future>
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- ⁵Centers for Disease Control, Older Adult Oral Health, [https://www.cdc.gov/oralhealth/basics/adult-oral-health/adult_older.htm#:~:text=About%20%20in%20%20\(68,or%20older%20have%20gum%20disease.&text=Tooth%20loss,.65%2D74%20\(13%25\)](https://www.cdc.gov/oralhealth/basics/adult-oral-health/adult_older.htm#:~:text=About%20%20in%20%20(68,or%20older%20have%20gum%20disease.&text=Tooth%20loss,.65%2D74%20(13%25)).
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- ⁹Bruce Dye, Clemencia Vargas, Jessica Lee, Laurence Madger, and Norman Tinanoff, “Assessing the Relationship Between Children's Oral Health Status and That of Their Mothers,” *The Journal of the American Dental Association*, February 2011, [https://jada.ada.org/article/S0002-8177\(14\)61498-7/fulltext](https://jada.ada.org/article/S0002-8177(14)61498-7/fulltext)
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