

Q: Does Medicare cover dental expenses?

A: No. One of the most obvious gaps in Medicare coverage is the lack of dental care. Medicare not only doesn't cover most dental procedures, like fillings, extractions, and dentures—it doesn't cover routine preventive care, like cleanings. Medicare covers a wide range of preventive services, from glaucoma screenings to bone mass measurements—but it's a plan with no teeth in it. "Unfortunately," Medicare admits, "the Medicare program does not cover routine dental care...for (it) is statutorily excluded from coverage. It would take an act of Congress to change the national coverage decision to not cover dental care."

A new report published by the Merck Institute of Aging and Health says that only 15 states meet the oral health target goal of 20% or fewer of its elders having suffered complete tooth loss. Massachusetts, for example, with 22.7% of its older population with complete tooth loss, failed the goal. The Merck study suggests that elders with bad oral health tend to have incomes below \$15,000, less than a high school education, diabetic, or a non-Hispanic black.

The MIAH recommends the following six guidelines to help elders lower their risk for dental decay:

1. Drink fluoridated water and use fluoride toothpaste.
2. Carefully brush teeth and floss to reduce dental plaque and prevent periodontal disease.
3. See a dentist regularly. Dentists can help spot precancerous or cancerous lesions early in their development.
4. Avoid tobacco products, including spit tobacco, which contains sugar. Smokers have a seven times greater risk of developing periodontal disease.
5. Avoid excessive alcohol drinking, which is a risk factor for oral and throat cancers.
6. Get dental care before undergoing chemotherapy or radiation to the head or neck. These therapies can damage oral tissues and lead to bone destruction.

Low-income elders have bad oral health because they can't afford to see a dentist regularly, and Medicare is of no help. In Massachusetts, the health care program just for the poor has no dental benefits. The Medicaid program classifies adult dental services as an optional benefit, allowing states the choice of including it, or not. In 2003, Massachusetts eliminated dental coverage for adults on Medicaid.

Even though bad oral health can lead to many other health related problems which result in higher public cost, the preventive importance of good dental care has no bite in Massachusetts. Bad oral health is a political problem, more than a public health issue.