# ORAL HEALTH CARE FOR PEOPLE WITH HIV INFECTION

#### A REVIEW OF THE LITERATURE



#### RATIONALE FOR ORAL CARE IN HIV

- Early recognition and management of oral conditions is important for quality of life
- Oral care supports proper nutrition, preventing or slowing wasting
- Oral lesions are clinical markers in the clinical spectrum of HIV disease



EXAMPLES OF HIV-RELATED ORAL LESIONS

- Oral/pharyngeal candidiasis
- Hairy leukoplakia
- Necrotizing ulcerative gingivitis
- Kaposis sarcoma lesions
- Intra-oral herpes infections
- Apthous ulcers



### PERIDONTAL DISEASE IN CHILDREN WITH HIV

#### **Conflicting data:**

- Primary dentition caries greater among children with HIV than US pedi population (in 100 children with HIV)
- Peridontal findings similar in 68 children with HIV to those of household peers and to US pediatric population



#### **ACCESS TO DENTAL CARE**

- Only 42% of HCSUS respondents saw a dentist in past 6 months
- 19% of HCSUS respondents had unmet need for dental care
- In ACSUS study, dental services were most commonly reported unmet need



## UNMET NEED FOR DENTAL CARE GREATER AMONG:

- Medicaid beneficiaries in states without dental benefits
- People without dental insurance
- People with incomes below \$5,000/yr
- People without a high school education
- African Americans and Hispanics



# **BARRIERS TO PROVIDING HIV ORAL HEALTH CARE**

- Inadequate space
- Low priority among agency policymakers
- Low priority for resource allocation decision making bodies
- Too costly to justify need and obtain funding



## **BARRIERS TO PROVIDING HIV ORAL HEALTH CARE**

- Cost of care, including meeting administration and reporting requirements, exceeds reimbursement
- Sources of reimbursement are limited



#### **MEDICAID COVERAGE**

- Under Medicaid, states are allowed to provide emergency, preventive, diagnostic, restorative, and more complex dental treatment
- However, dental care is an optional service for adult, which states may or may not choose to provide



#### MEDICAID DENTAL COVERAGE FOR ADULTS

- Full dental coverage: 15 states
- Partial dental coverage: 18 states
- No dental coverage: 18 states
- Dentures: 34 states
- Caveat: Even in states with full coverage, it may only be available to certain categories of Medicaid beneficiary



#### MEDICAID DENTAL COVERAGE FOR CHILDREN

• Mandated dental services: comprehensive preventive, restorative, and emergency



#### UTILIZATION OF DENTAL SERVICES IN MEDICAID

- In 1996, only 18% of children enrolled in Medicaid received any preventive dental screening or services
- In 1996, only 29% of adults enrolled in Medicaid visited a dentist in the preceding year, less than half the rate among higher-income adults



#### **BARRIERS TO UTILIZATION** OF DENTAL SERVICES

#### **Dentists are unwilling to treat Medicaid** clients because:

- Inadequate reimbursement
- Burdensome administrative requirements
- Delays in reimbursement
- Loss of revenue for missed appointments
- Perceived stigma with Medicaid clients



#### FEDERAL EFFORTS TO INCREASE UTILIZATION

 Increased oversight to states with a low proportion of Medicaid-enrolled children who made a dental visit in the preceding year



**STATE EFFORTS TO INCREASE UTILIZATION** 

- Rate increases
- Streamlined administrative procedures
- Coalition building among stakeholders
- Beneficiary education
- Capacity-building for safety-net providers
- Increased use of dental hygienists
- Direct services by Medicaid



**RYAN WHITE CARE ACT: FUNDED DENTAL SERVICES** 

- Title I: 2.9% of funds in FY 2000
- Title II: 2.2% of funds in FY 2000
- Title III: \$6 million in most recent grant award cycle
- Title IV: information not available



# RYAN WHITE CARE ACT-FUNDED DENTAL SERVICES

- Retrospective payment for services rendered but not reimbursed
- FY1997: \$7.5 million
- FY 2001: \$10 million (Although \$12.7 million reported in non-reimbursed costs)
- Less than one-half of 1% of the entire CARE Act budget



#### GOALS OF RYAN WHITE CARE ACT DRUG REIMBUREMENT PROGRAM

- Assist in covering non-reimbursed costs of HIV care by dental schools
- Improve access to oral health care for PLWH
- Ensure proper training for new providers

