

Dental Exams Spot Systemic Ailments – Business Insurance, April 25, 2011

Some employers manage to cut costs by increasing benefits

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After attending a seminar several years ago where she heard a dental expert talk about the link between oral and systemic health, Fran Ruderman saw to it that her company's dental plan covered three dental cleanings per year for all of its employees.

Last year, Leviton Manufacturing Co. Inc. in Melville, N.Y., added a fourth cleaning per year for pregnant women—not only because pregnancy often has a detrimental effect on gums and teeth, but because women with periodontal disease may be at greater risk of a preterm delivery, said Ms. Ruderman, vp of human resources at Leviton.

“Sometimes employers feel that it will cost them more money to add a third dental hygiene visit (per year), but it is important to understand the correlation between poor dental health and certain medical conditions,” she said.

Employers that persuade their employees and dependents to use their dental benefits could see lower health care costs overall, experts say.

In fact, individuals suffering from coronary artery disease, diabetes or cerebrovascular disease (stroke) who receive regular periodontal treatments had lower medical costs than those who do not receive such care, according to a two-year retrospective examination of Aetna Inc.'s claims data by Columbia University's College of Dental Medicine.

As a result of that study, Aetna began offering enhanced dental benefits for dental plan members who were identified as having those health conditions, said Dr. Mary Lee Conicella, Pittsburgh-based chief dental officer.

Also, in response to growing scientific evidence of a link between oral and systemic health, Philadelphia-based CIGNA Corp. recently expanded dental services under its group dental plans.

When it first launched in 2006, CIGNA's Oral Health Integration Program provided enhanced dental coverage to treat gum disease of pregnant women and people with cardiovascular disease and diabetes enrolled in its dental and medical plans. But beginning this year, the program was extended to all CIGNA dental plan members with qualifying medical conditions, regardless of whether they are also enrolled in a CIGNA medical plan.

In some cases, access to dental benefits has led to early detection of more serious health conditions (see box, page 9), experts say.

“One of the first things a dentist asks his or her patients to do is to complete a health history. Dentists look for connections, and we're seeing new connections all the time,” said Dr. John Yamamoto, vp of professional services at Delta Dental Plans Assn. in San Francisco.

For example, “periodontal disease is an inflammatory response indicating that something else is wrong in the body,” he said.

Stacey Whidden, president and CEO of Express Dental Care L.L.C. in Tampa, Fla., which provides

occupational dental care, has run into situations in which a dentist discovered undiagnosed diabetes in workers compensation claimants suffering from mouth injuries.

In one case, “the claimant hadn't seen a dentist in two years. When the dentist examined him, he saw that he had advanced periodontal disease and possibly diabetes,” so he was referred to a physician who confirmed the diagnosis, Ms. Whidden said.

“What people don't realize is that when the dentist tells you that you have great teeth and gums, that means you have good overall health,” she said.

Recognizing that dentists may be able to detect certain systemic health issues early, UnitedHealth Group Inc. recently launched a pilot wellness program in which Houston city employees enrolled in its HMO receive biometric screenings from dentists, rather than doctors or nurses, said Dr. John Luther, San Francisco-based chief dental officer of UnitedHealthcare Dental.

“While certain diseases can be identified in the health history, they also can be identified through observation. For example, facial asymmetry or lesions on the lower lip can be indicative of oral cancer,” he said. Alternatively, “a head and neck examination can identify HIV or AIDS.”

In addition, “diabetics get periodontal disease more frequently than nondiabetics do,” Dr. Luther said. “If you can control periodontal disease in a diabetic, you will also have an easier time controlling blood sugar” levels, he said.

“If we get patients into care early, we have a win-win situation in not only improving outcomes but also in reducing overall health care costs,” he said.

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