

## Who Needs Coverage

Oral health problems that arise during pregnancy may persist into the postpartum period and beyond to subsequent pregnancies, especially if new mothers do not have consistent Medicaid dental coverage and access to care. The majority of states offer 12 months' postpartum coverage with varied income eligibility requirements.

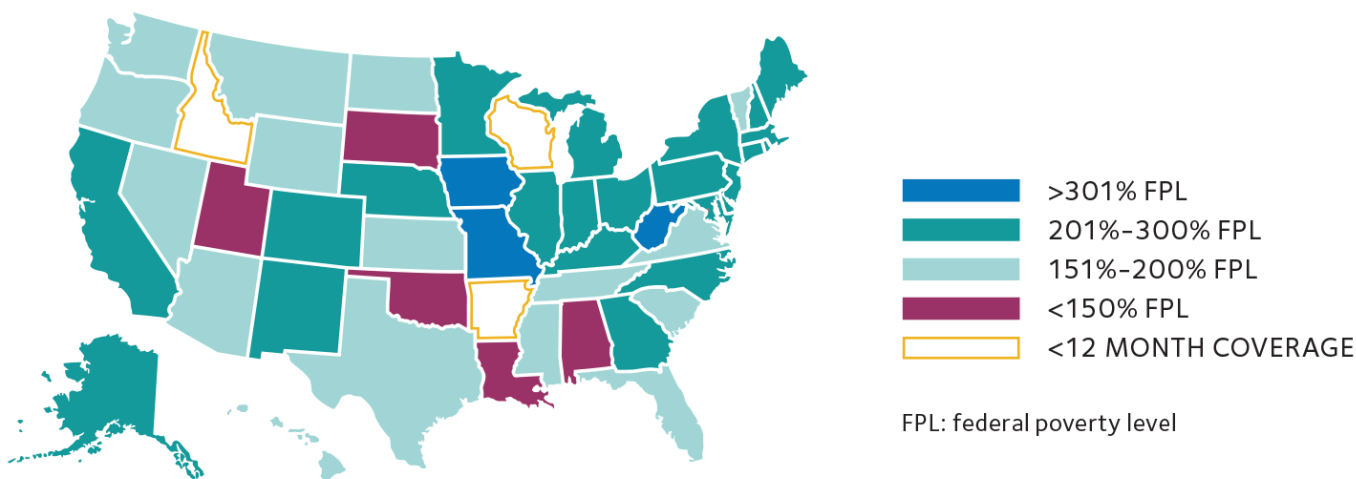
The Medicaid program for low-income individuals covered 19% of adult women ages 19 to 22 in 2022. More than two out of five mothers who gave birth in 2021 had Medicaid as the principal source of payment for the delivery (41.0%). (Characteristics of Mothers by Source of Payment for the Delivery, 2023)



**41.0%: 1.49 MILLION BIRTHS**

**MORE THAN TWO OUT OF EVERY FIVE MOTHERS** WHO GAVE BIRTH IN 2021 HAD MEDICAID AS THE PRINCIPAL SOURCE OF PAYMENT FOR THE DELIVERY

## Postpartum Coverage Income Eligibility Requirements



## Improved Health Outcomes when Pregnant Women Visit the Dentist

Hormonal fluctuations during pregnancy lead to inflammation in the oral cavity and increased risk for periodontal disease, including gingivitis and periodontitis as well as tooth loss. These health conditions can in turn increase risk for preterm birth, low birth weight, and preeclampsia. **States with limited adult dental benefits (for both pregnant and non-pregnant adults) have some of the highest rates of preterm birth and infant mortality in the nation.** (The Role of Medicaid Adult Dental Benefits During Pregnancy and Postpartum, 2023)

About one-third of postpartum women who lost Medicaid coverage at some point during the 12-month postpartum period experienced multiple health issues, including Cesarean section surgery recovery, postpartum depression, obesity, gestational diabetes, and hypertension. Some of these conditions have clear oral health implications. For example, heart issues and hypertensive disorders account for 13% and 7% of postpartum deaths respectively; both of these conditions have known correlations to negative oral health implications.

## Dental Care Utilization Increases with Benefits Coverage

Oral health care, while essential, is often underutilized during pregnancy, especially for people enrolled in Medicaid. Women with Medicaid health coverage but without dental benefits had a dental utilization rate of 26.7% during their pregnancy compared to 36.6% utilization in states with limited dental coverage and 44.9% in states with extended coverage. (Lee H, 2022) Overall, 37.4% of women enrolled in Medicaid received a basic cleaning during their pregnancy. By comparison, 81.8% received intermediate prenatal medical care.

Eight states have not expanded Medicaid since the Affordable Care Act (ACA) implementation, and in these same states, pregnant and postpartum women have higher rates of being uninsured (in non-expansion states, 22% of postpartum women are uninsured compared to 7% in expansion states).

## What are the Implications?

**Medicaid dental benefits for all pregnant women would lead to an estimated cost savings of \$1,500 with a second pregnancy to \$2,400 with a first pregnancy.** (Vujicic M, 2021)

The average duration of postpartum Medicaid coverage is 7.8 months while the majority of postpartum health spending arises after 90 days, with 72% occurring months 4 through 12. (Bloschichak A, 2020) More than half of new mothers lose their Medicaid eligibility at some point during the first 6 months of the postpartum period. In some states with limited adult dental benefits, the postpartum uninsured rate among women whose births were paid for by Medicaid was as high as 57% in Texas, 46% in Oklahoma, 39% in Georgia and Nebraska three months postpartum.

Overall maternal morbidity costs \$32.3 billion from conception to 5 years postpartum—this includes medical and non-medical costs, including loss of productivity and need for social services. Extensions of Medicaid coverage could lead to considerable health care cost savings. For example, hospitalization rates (from non-dental conditions such as birth complications, injury, mental disorders, etc.) are lower among postpartum women living in expansion states vs. non-expansion states. (Advancing Maternal and Infant Health by Extending the Postpartum Coverage Period, 2021)

The Centers for Disease Control and Prevention reported that the majority of pregnancy-related deaths (four out of five) were preventable and could be improved if the people who are pregnant or postpartum receive the right care at the appropriate time. (CDC: Four in 5 pregnancy-related deaths in the US are preventable, 2022)

## Prioritize Oral Health for Pregnant and Postpartum Women

The ADA supports expanding dental coverage for women during their pregnancy and 12 months postpartum. We look forward to working with Congress on efforts to improve and maintain the oral health of mothers across our nation.

For more information visit [ADA.org/advocacy](https://ADA.org/advocacy).



**MEDICAID DENTAL BENEFITS FOR ALL PREGNANT WOMEN WOULD LEAD TO AN ESTIMATED COST SAVINGS OF \$1,500 (SECOND PREGNANCY) TO \$2,400 (FIRST PREGNANCY)**