National Trends in Dental Care Use, Dental Insurance Coverage, and Cost Barriers

November 2023 (Updated March 2024)

In this deck

- Updated national trends based on the latest available data as of November 2023:
 - Dental care use based on Medical Expenditure Panel Survey (MEPS) data
 - Dental insurance status based on MEPS data
 - Cost barriers to dental care based on National Health Interview Survey (NHIS) data
- Results available by age group, race/ethnicity and income level. Cost barriers results also available by insurance status.
- Detailed Data & Methods:

https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/resources/research/hpi/national_trends_dental_use_benefits_barriers_methods.pdf.

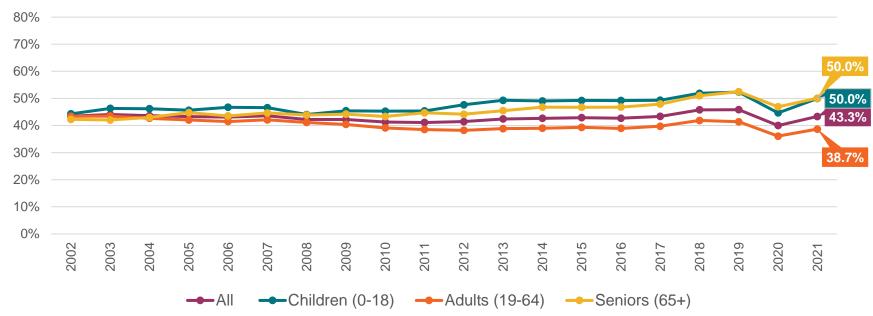
Dental Care Use

Dental Care Use – Latest Data Highlights

- An estimated 43% of the U.S. population visited a dentist in 2021.
 - Note that due to the methodology used (MEPS), this figure should be viewed as a slight underestimate of the true dental care use rate.
 - Alternative data sources are less reliable and prone to large overestimates (e.g. NHIS, NHANES, BRFSS). Hence HPI relies on the MEPS data.
- While 50% of seniors and children visited a dentist in 2021, only 39% of adults ages 19-64 saw a dentist.
- There are disparities in dental care use by race/ethnicity and income. The disparities are generally smallest for children.
- Income is broken down by Federal Poverty Levels (FPLs), a measure issued every year by the Department of Health and Human Services (HHS).

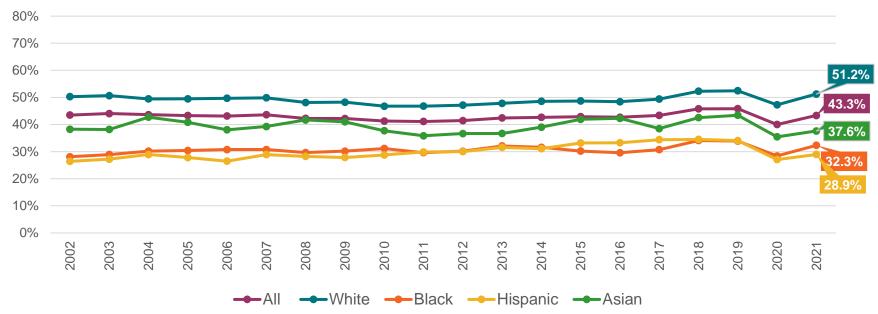
Dental Care Use by Age Group





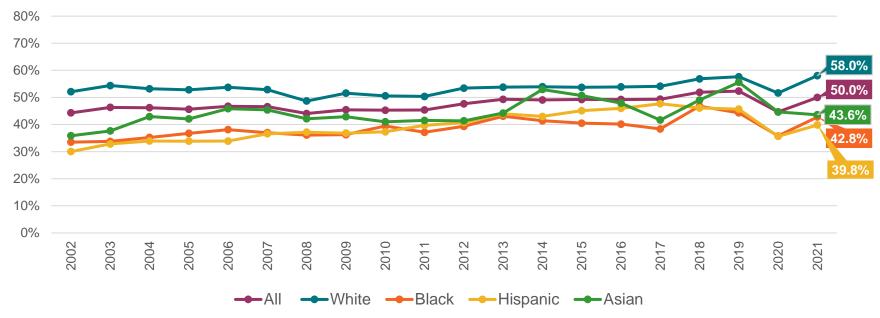
Dental Care Use by Race/Ethnicity





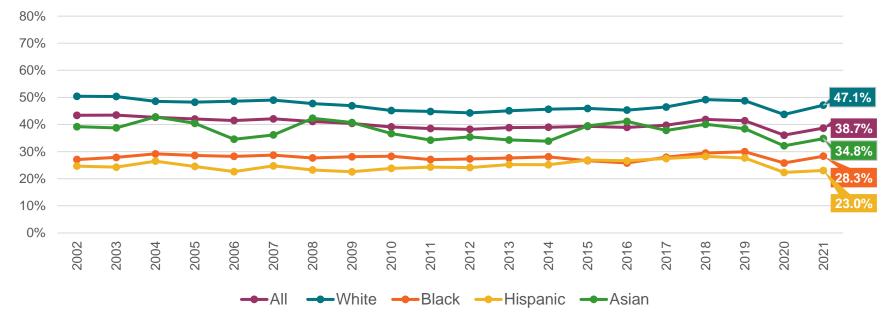
Dental Care Use by Race/Ethnicity and Age





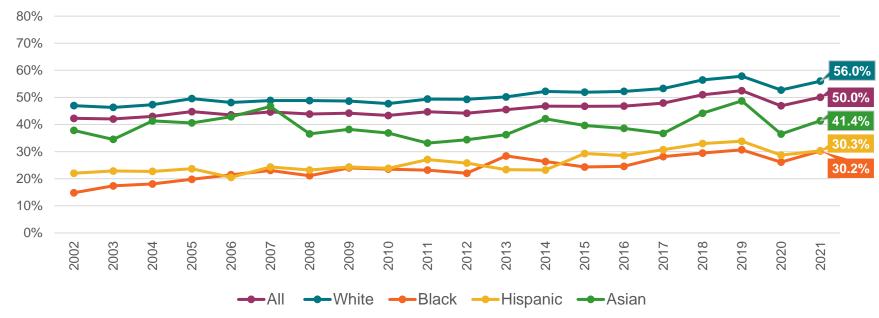
Dental Care Use by Race/Ethnicity and Age





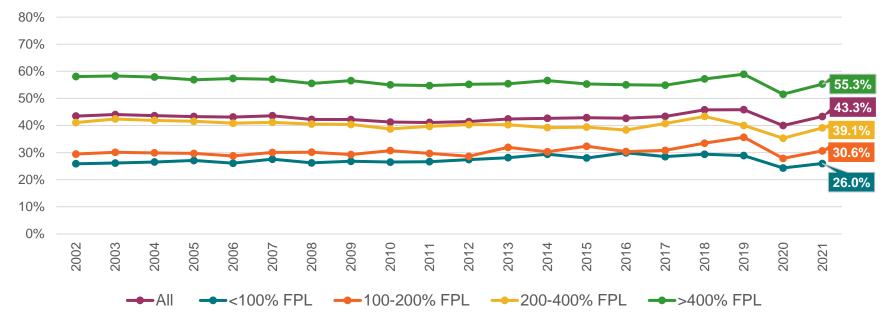
Dental Care Use by Race/Ethnicity and Age





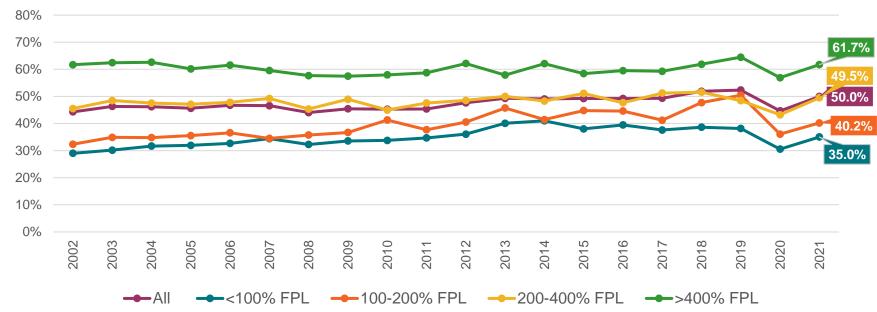
Dental Care Use by Income Level





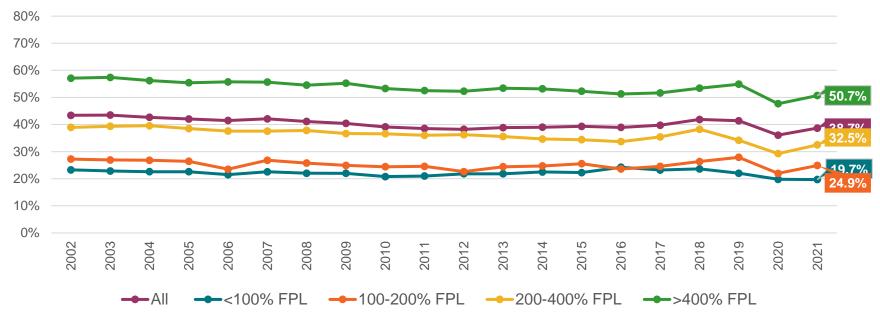
Dental Care Use by Income Level and Age





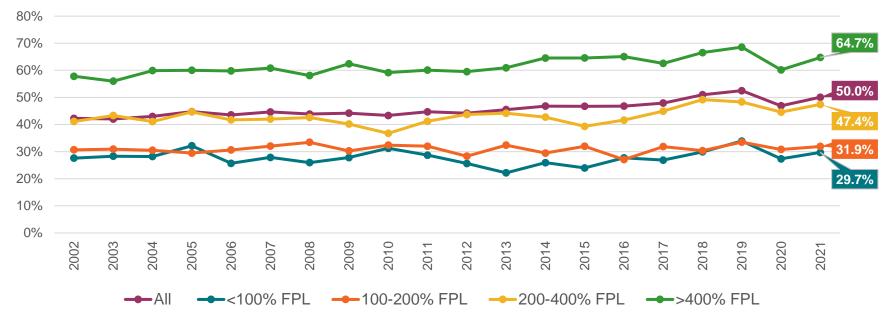
Dental Care Use by Income Level and Age





Dental Care Use by Income Level and Age





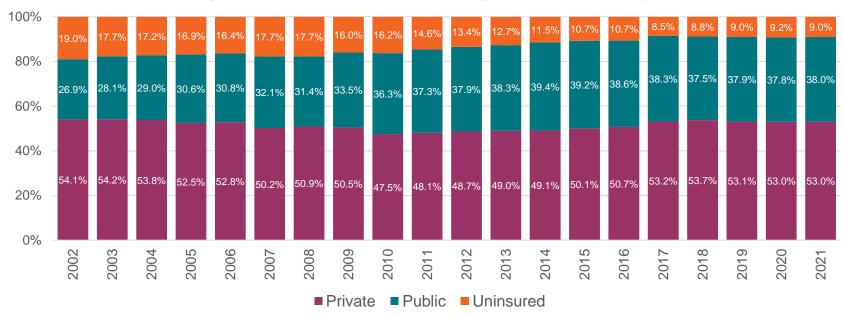
Dental Insurance Status

Dental Insurance Status – Latest Data Highlights

- The percentage of children with no dental insurance decreased to 9% in 2021, continuing a long-term downward trend. The share of children with public dental insurance (i.e. Medicaid and CHIP) was 38% in 2021, significantly higher than in previous years.
- Among adults, 61% have private dental insurance. This has been stable for the
 past few years and is slightly higher than a decade ago. Because Medicaid
 programs differ widely when it comes to adult dental benefits coverage, the
 MEPS data do not allow accurate estimates of the percent of adults with public
 dental insurance coverage.
- For seniors, we do not present results due to inaccurate capture of private dental insurance status via Medicare Advantage. The data are too unreliable.

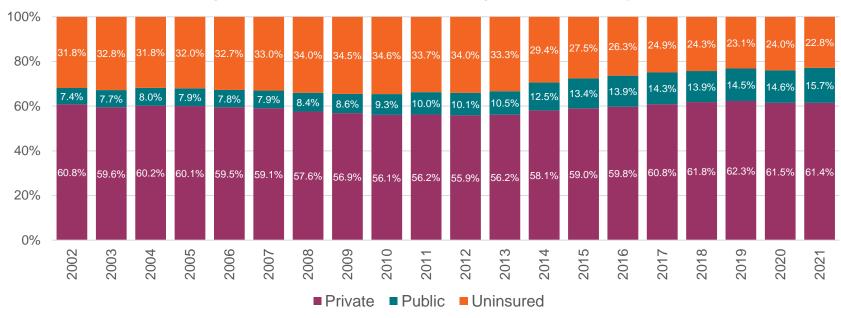
Dental Insurance Status by Age

Percentage by Type of Dental Coverage – Children (Ages 0-18)



Dental Insurance Status by Age

Percentage by Type of Dental Coverage – Adults (Ages 19-64)



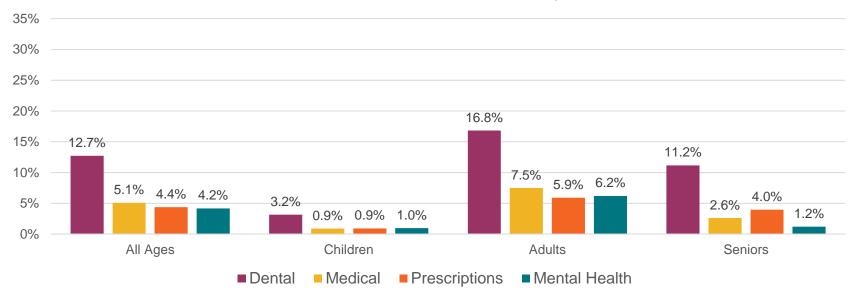
Cost Barriers

Cost Barriers to Care – Latest Data Highlights

- Compared to other types of health care services, cost barriers are most severe for dental care services. For example, 13% of the population reported cost barriers to dental care, compared to 4-5% for other health care services.
- Children and seniors report lower levels of cost barriers to dental care than adults.
- Across all age groups, Hispanic people have the highest levels of cost barriers to dental care. However, racial/ethnic disparities in cost barriers to dental care are much narrower among children compared to working-age adults and seniors.
- For all age groups, low-income people have higher cost barriers to dental care.
 However, the income disparities are narrower among children.
- Across all age groups, compared to individuals with public dental insurance or no dental insurance, those with private dental benefits have the lowest levels of cost barriers to dental care.

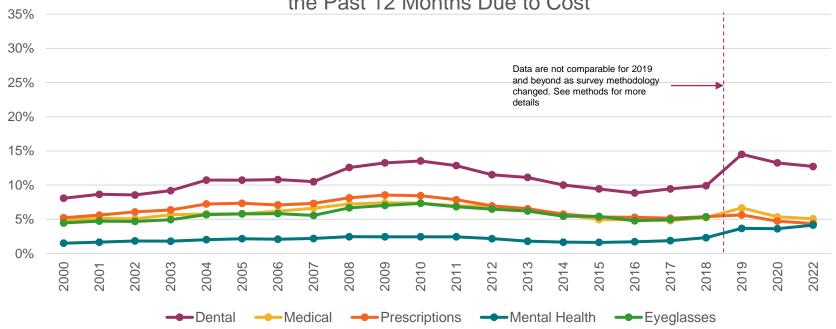
Cost Barriers to Care

Percentage Who Did Not Obtain Needed Health Care Services During the Past 12 Months Due to Cost, 2022

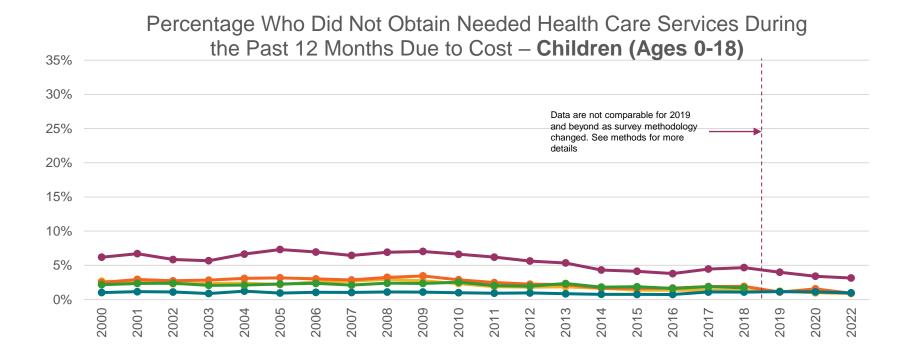


Cost Barriers to Care





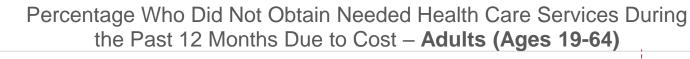
Cost Barriers to Care by Age

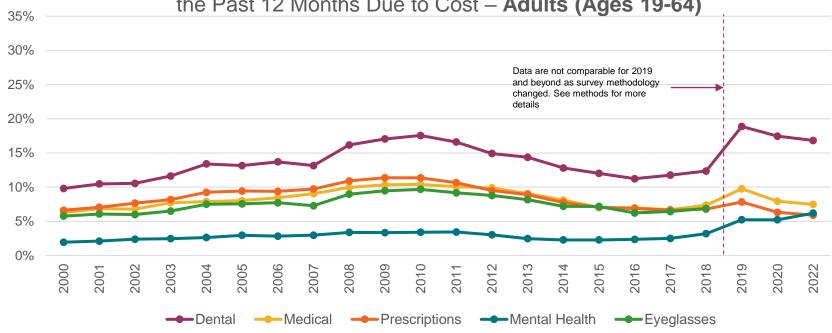


Medical Prescriptions

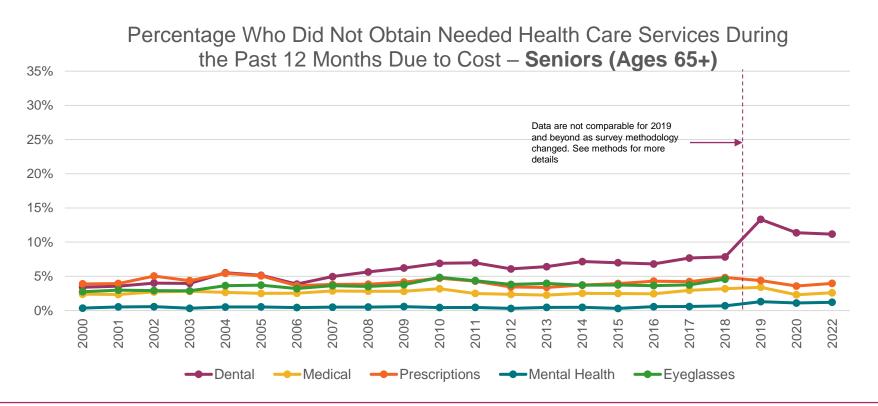
Mental Health

Cost Barriers to Care by Age

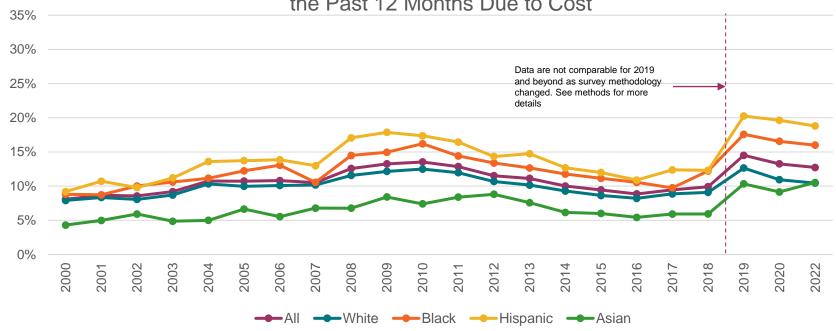


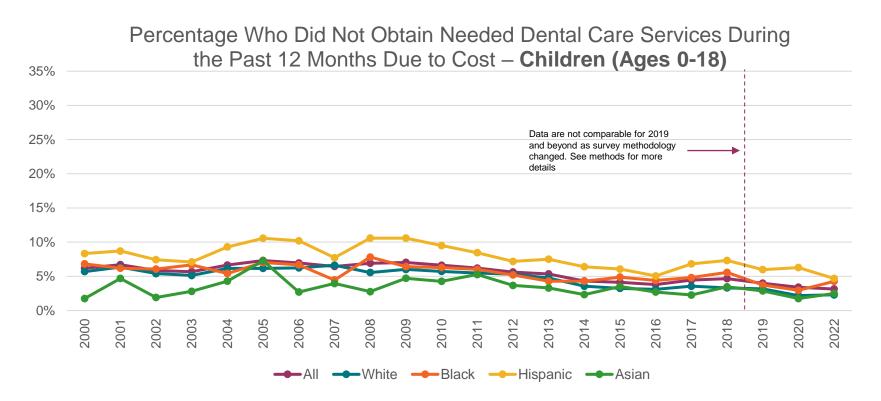


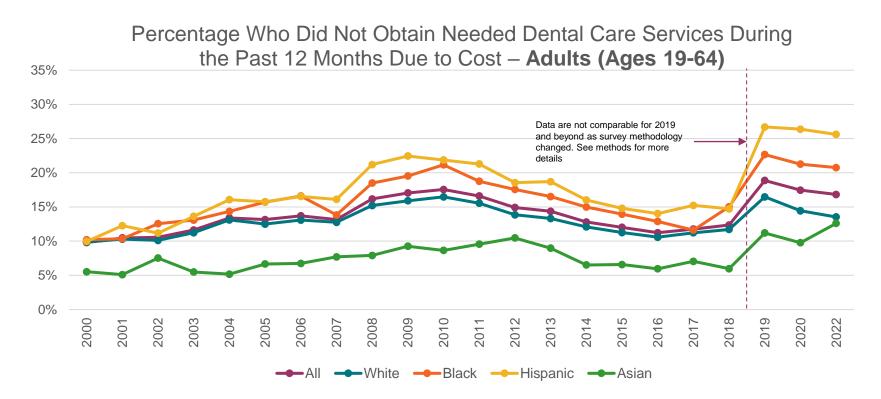
Cost Barriers to Care by Age

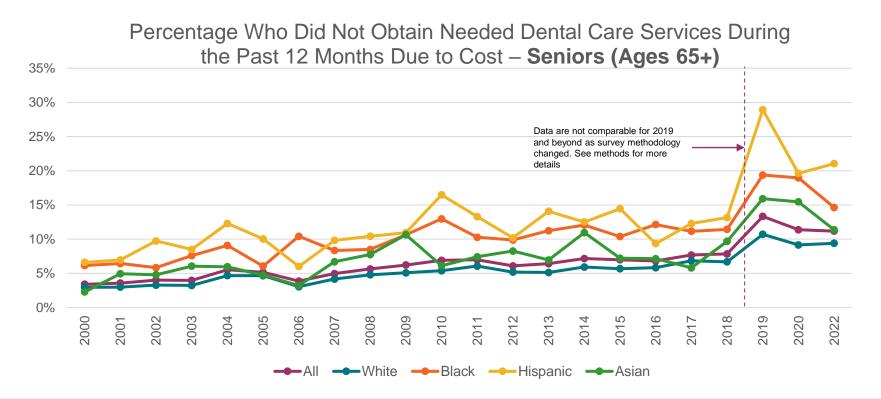




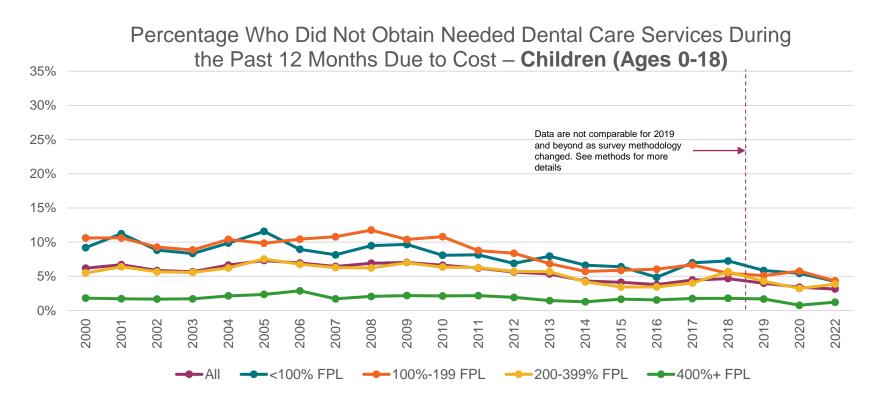




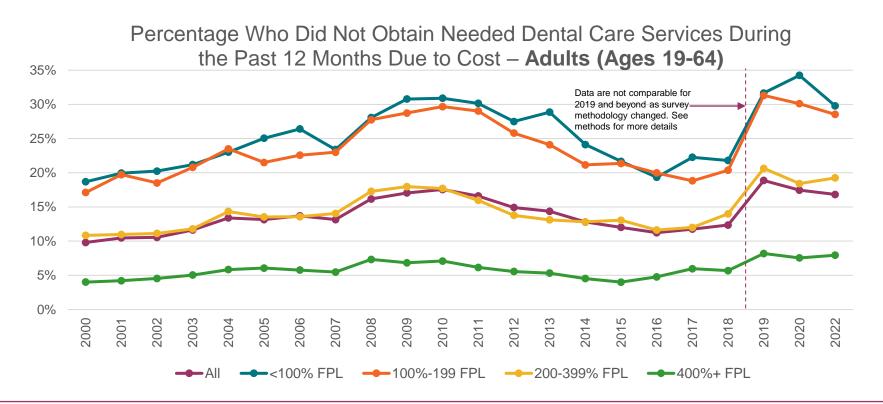


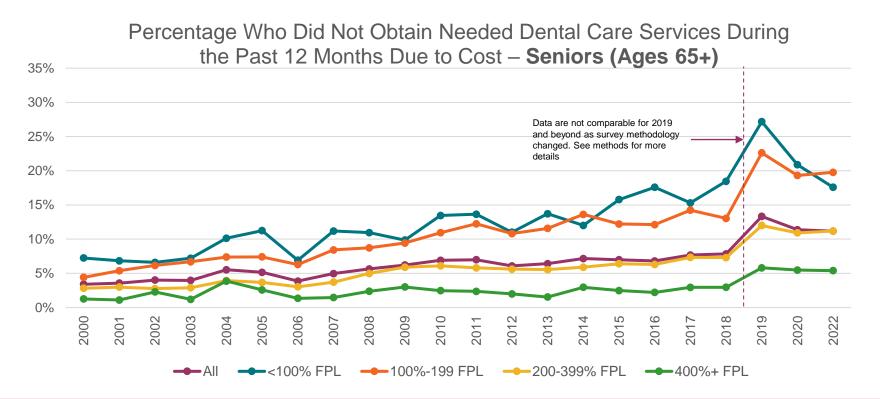


Cost Barriers to Dental Care by Income Level & Age

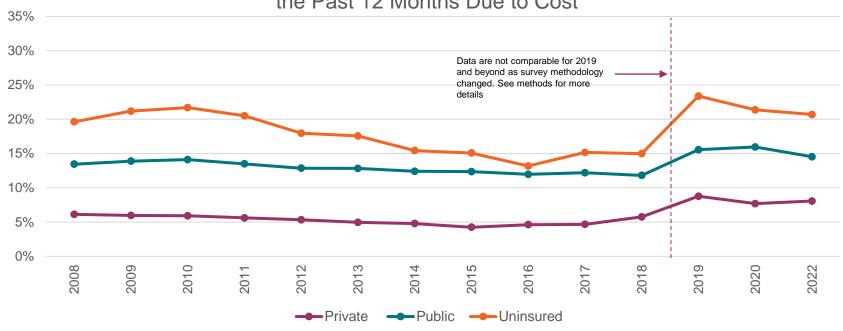


Cost Barriers to Dental Care by Income Level & Age

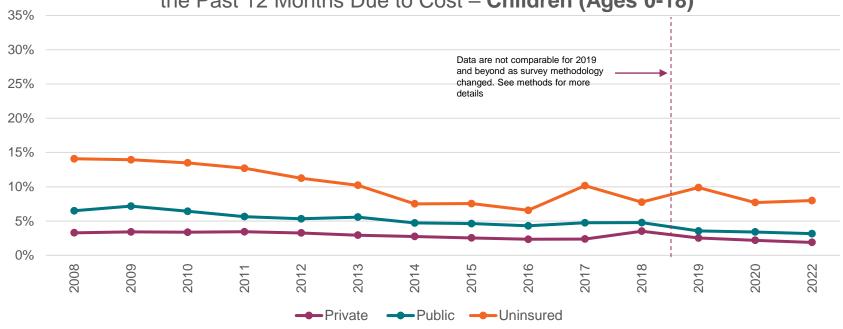


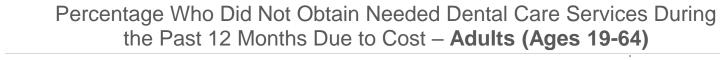


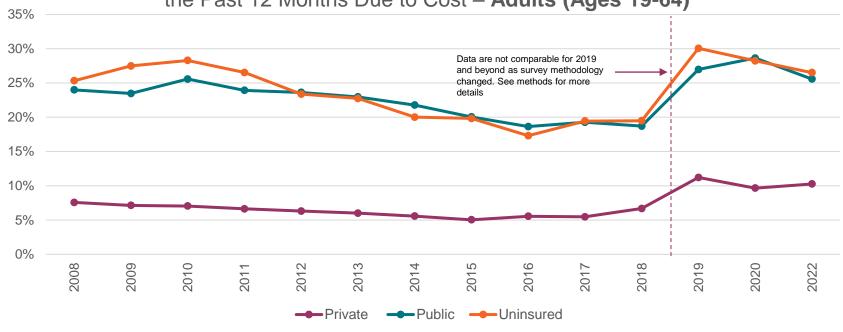




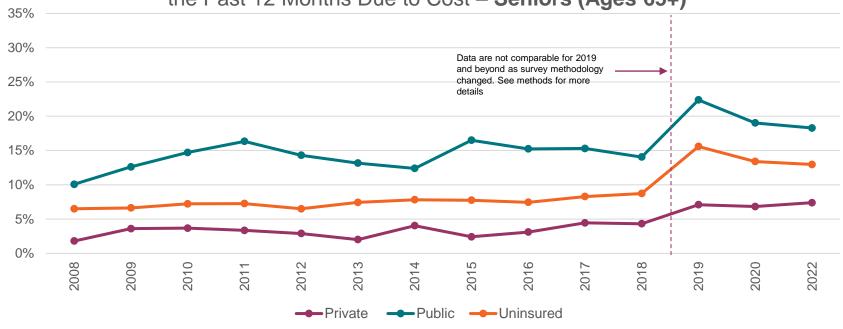












Data & Methods

Data Sources

- Data on dental care use and dental insurance status are from the Medical Expenditure Panel Survey (MEPS) that is managed by the Agency for Healthcare Research and Quality (AHRQ). The latest data available are for 2021.
- Data on cost barriers to various types of health care services are from the National Health Interview Survey (NHIS). The latest data available are for 2022.
- Please review this Data & Methods document for additional information.
 https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/resources/research/hpi/national_trends_dental_use_benefits_barriers_methods.pdf.

Notes

- Race/ethnicity categories are partly driven by data availability and categories provided in the MEPS and NHIS data.
- For cost barriers to care data, there was a change in the way the question was asked by NHIS
 beginning in 2019. This is denoted by a dotted line in the applicable charts. Trends can be
 analyzed pre-2019 and then separately for 2019 and beyond but not across 2019. Additionally, in
 2021 data were not available for dental services. Lastly, NHIS stopped asking about cost barriers
 to prescription eyeglasses in 2019.
- For dental insurance coverage, MEPS does not accurately capture private dental insurance obtained via Medicare Advantage plans. Hence, we do not analyze dental insurance coverage for seniors.
- For an overview of methodological differences in MEPS, NHIS, NHANES when it comes to estimating dental care use, please refer to this study:

Macek MD, Manski RJ, Vargas CM, Moeller JF. Comparing oral health care utilization estimates in the United States across three nationally representative surveys. Health Services Research. 2002;37(2):499-521.