

# JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

November 27, 2019

Rural and Underserved Communities Health Task Force  
Committee on Ways & Means  
U.S. House of Representatives

Submitted electronically: [Rural\\_Urban@mail.house.gov](mailto:Rural_Urban@mail.house.gov)

## Re: Rural and Underserved Communities Health Task Force Request for Information

Dear Chairman Neal and Ranking Member Brady:

We appreciate the opportunity to respond to this request for information (RFI) and the Ways & Means Committee's commitment to improving health care outcomes within rural and underserved communities. Justice in Aging is an advocacy organization with the mission of improving the lives of low-income older adults. We use the power of law to fight senior poverty by securing access to affordable health care, economic security and the courts for older adults with limited resources, and center our advocacy on addressing the needs people who have been marginalized and excluded from justice, such as women, people of color, LGBTQ individuals, and people with limited English proficiency. Our responses to this RFI are informed by our decades of experience with Medicare and Medicaid and the dually eligible population.

### Responses to Information Requests

#### 2. What successful models show a demonstrable, positive impact on health outcomes within rural or underserved communities?

- The **Program for All Inclusive Care for the Elderly (PACE)** is an effective way to integrate care for high need older adult Medicare beneficiaries, most of whom are dually eligible for Medicaid. PACE programs have been successful in rural and underserved areas of the country.<sup>1</sup> They enable older adults to remain living in their homes and communities while getting access to the care and services they need, including LTSS like adult day and dental care. For many participants, PACE becomes part of their "home," both in terms of social network and medical needs.
- **Telehealth** has been shown to be particularly beneficial for frail older adults and persons with disabilities for whom travel to a provider can create difficulties. Advances in telehealth present an important opportunity to provide access to a broader range of services that a particular community may not have, such as dental care. Additionally, telehealth has the potential to relieve some the burdens that beneficiaries who rely on non-emergency medical transportation (NEMT) for provider appointments, either through Medicaid or as a supplemental Medicare benefit, experience due to continuing

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<sup>1</sup> Robert Greenwood and Samuel Kunjukunju, American Society on Aging, PACE Provides Much-Needed Rural Supports and Services for Older Adults, <https://www.asaging.org/blog/pace-provides-much-needed-rural-supports-and-services-older-adults>.

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inadequacies. In expanding telehealth, care must be taken to avoid diminishing the quality of care and ensuring access is available to all Medicare enrollees, whether they are enrolled in Medicare Advantage or Original Medicare.

**7. Access to providers that address oral, behavioral, and substance use needs in rural and underserved communities can be particularly limited. What approaches have communities or states taken to address such gaps in care delivery?**

- **Increase Access to Oral Health in Institutional Settings**

Nursing facility residents face significant and unique barriers in accessing oral health coverage, and outcomes are poorer for residents residing in facilities in rural regions. For example, a recent California-based study found older adults residing in nursing homes in rural counties were 10% more likely to have untreated tooth decay than their urban counterparts and also have more teeth that are untreated.<sup>2</sup> Residents in rural counties were also more likely to have untreated gum disease, have lost all their natural teeth, and twice as likely not to have dentures compared to their urban counterparts. We strongly encourage the Task Force to consider models tailored to delivering dental services in institutional settings, such as Apple Tree Dental,<sup>3</sup> and consider increased training requirements for care staff to both identify oral health needs and perform oral hygiene to improve the oral health of facility residents.

- **Provide Services Where People Are**

Providing dental services where older adults are, including in senior centers,<sup>4</sup> at home, and in nursing facilities, improves access to care by overcoming the barrier that lack of transportation poses. In addition to teledentistry, we recommend supporting innovative models like the virtual dental home.<sup>5</sup>

**10. Are there two or three institutional, policy, or programmatic efforts needed to further strengthen patient safety and care quality in health systems that provide care to rural and underserved populations?**

Rural communities comprise 66% of the nation's dental health professional shortage areas.<sup>6</sup> This means that dental care is largely unavailable, extremely limited, and costly for rural residents (one-fifth of whom are 65 and older). Consequently, 20% of rural seniors have not seen a dentist or visited a dental clinic in over five years compared to 14% of non-rural seniors;

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<sup>2</sup> Center for Oral Health, "A Healthy Smile Never Gets Old: A California Report on the Oral Health of Older Adults," (2018), available at [www.centerfororalhealth.org/wp-content/uploads/2018/11/Oral-Health-of-Older-Adults.pdf](http://www.centerfororalhealth.org/wp-content/uploads/2018/11/Oral-Health-of-Older-Adults.pdf).

<sup>3</sup> See, for example, Apple Tree Dental, available at [https://oralhealth.acl.gov/sites/default/files/uploads/docs/Apple\\_Tree\\_Dental.pdf](https://oralhealth.acl.gov/sites/default/files/uploads/docs/Apple_Tree_Dental.pdf).

<sup>4</sup> See for example, the Gary and Mary West Senior Dental Center, available at <https://www.servingseiors.org/what-we-do/gary-mary-west-senior-wellness-center/overview.html>.

<sup>5</sup> Virtual Dental Home, available at [https://oralhealth.acl.gov/sites/default/files/uploads/docs/Virtual\\_Dental\\_Home.pdf](https://oralhealth.acl.gov/sites/default/files/uploads/docs/Virtual_Dental_Home.pdf).

<sup>6</sup> Rural Health Information Hub, Health professional shortage areas: Dental care (2017 map) available at <https://www.ruralhealthinfo.org/rural-maps/mapfiles/hpsa-dental-care.jpg>.

and 1 in 5 rural seniors have had all their teeth pulled, exacerbating chronic conditions like diabetes and heart disease.<sup>7</sup>

**Adding a comprehensive dental benefit to Medicare Part B**<sup>8</sup> would provide coverage to most older adults as well as younger Medicare beneficiaries with disabilities.<sup>9</sup> It would also attract more oral health providers to rural regions since Medicare would reimburse services provided to many rural residents who currently cannot afford oral health treatment.

Rural residents are more likely than non-rural residents to depend on Medicaid for health insurance because they are less likely to be employed, more likely to have a disability, and more likely to be low-income.<sup>10</sup> As adult dental is an optional Medicaid benefit, many states with large rural populations do not provide adequate coverage.<sup>11</sup> **Requiring state Medicaid programs to cover adult dental** would provide access to dental services and better health outcomes to tens of millions of low-income adults, helping to reverse the poor oral health trends we see among seniors, especially those in rural areas.<sup>12</sup>

If you have any questions or would like to discuss any of these policy proposals, please feel free to contact Natalie Kean, Senior Staff Attorney, at [nkean@justiceinaging.org](mailto:nkean@justiceinaging.org).

Sincerely,



Jennifer Goldberg  
Deputy Director

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<sup>7</sup> Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Ga.: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2016. Analyzed by DentaQuest Institute.

<sup>8</sup> Multiple bills have been introduced to add an oral health benefit to Part B, including H.R. 4650, the Medicare Dental Benefit Act of 2019 (HR 2951/S. 22); Medicare Dental, Vision & hearing Benefit Act of 2019 (HR 1393); Seniors Have Eyes, Ears, and Teeth Act (HR 576); and Medicare and Medicaid Dental, Vision, and Hearing Benefit Act of 2019 (S. 1423).

<sup>9</sup> Oral Health America, "An Oral Health Benefit in Medicare Part B: It's Time to Include Oral Health in Health Care," (July 2018), available at <https://www.justiceinaging.org/wp-content/uploads/2018/07/Medicare-Dental-White-Paper.pdf>; Families USA, "For Rural Seniors, Improving Overall Health Requires Improving Oral Health Care," (Dec. 2018), available at <https://familiesusa.org/product/rural-seniors-improving-overall-health-requires-improving-oral-health-care>; Justice in Aging, "Creating an Oral health Benefit in Medicare: A Statutory Analysis," (Jan. 2019), available at <https://www.justiceinaging.org/wp-content/uploads/2019/01/Creating-an-Oral-Health-Benefit-in-Medicare-A-Statutory-Analysis.pdf>.

<sup>10</sup> Kaiser Family Foundation, "The Role of Medicaid in Rural America," (Apr. 2017), available at <https://www.kff.org/medicaid/issue-brief/the-role-of-medicaid-in-rural-america/>.

<sup>11</sup> Three states provide no coverage, 12 states only cover services to relieve pain in emergency situations, and 17 states provide limited coverage. Center for Health Care Strategies, "Medicaid Adult Dental Benefits: An Overview," (Nov. 2018), available at [www.chcs.org/media/Adult-Oral-Health-Fact-Sheet\\_112118.pdf](http://www.chcs.org/media/Adult-Oral-Health-Fact-Sheet_112118.pdf).

<sup>12</sup> Kaiser Family Foundation, Full-Benefit Medicaid Enrollees by Enrollment Group, (FY 2014), available at [www.kff.org/medicaid/state-indicator/distribution-of-full-benefit-medicaid-enrollees-by-enrollment-group/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D](http://www.kff.org/medicaid/state-indicator/distribution-of-full-benefit-medicaid-enrollees-by-enrollment-group/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D).