



THE UNSEEN DENTAL CRISIS OF AMERICAN SENIORS

A REPORT BY HEALTHCARE-NOW EDUCATION FUND

OVERVIEW

In the past 56 years, Medicare has provided crucial access to healthcare for millions of seniors and those with disabilities. When it comes to dental care, however, Medicare enrollees are little better off than they were in 1965.

Seniors have much higher dental health needs, at exactly the moment when they have often lost access to disposable income, and are living on meager social security benefits. According to the CDC, 1-in-5 adults aged 65 and older have lost all of their teeth; 68.5% have gum disease; and 1-in-5 suffer from untreated tooth decay.

The Healthcare-NOW members who tell their stories in this report paint a heartbreaking picture of how lack of comprehensive dental insurance can impact the lives of seniors. The extraordinary costs of dental care lead to the obliteration of retirement savings, can push Medicare recipients into poverty, and just as often lead seniors to forego treatment altogether - leaving them in constant pain, with difficulty eating, and struggling with social isolation due to visible tooth loss. Those affected feel that our country has forgotten about them, and doesn't truly value their life-long contributions, their lives, or their well-being.

As Congress decides whether to include comprehensive dental benefits in the Build Back Better bill, we hope that the voices of those who will benefit — or suffer the consequences — will speak louder than lobbyists for the dental industry.

1-in-5 adults aged 65 and older
have lost all of their teeth

PATIENT STORIES

ROBBY

Copalis Beach, Washington

“I’m 71 years old and in desperate need of dental care. Dentists have been too expensive for me for years. That has led to the loss of multiple upper teeth. I’m embarrassed to even write this but I now only have 5 upper teeth. It’s incredibly embarrassing and I will only talk to those who’ve seen my tooth loss. The necessary mask usage helps, but I’m still depressed about it. Chewing is a challenge so I’m only eating soft foods, like an infant. It’s terrible.”

MARY

Devine, Texas

“My husband and I both have dental problems. I had my bottom teeth pulled out in hope of getting affordable dentures. I went to see about them, and the price is always three to six thousand dollars. It is outrageous. The dentist industry charges three hundred or more just to pull out teeth. I don’t have insurance. My husband has Medicare but it doesn’t cover dental. The dentist offices we’ve been to are rude and have no empathy. We both can’t eat nuts, dried fruit or even salads. We would like to eat healthy. We are unable to have protein foods. I have gotten choked. I mostly eat very soft foods and make smoothies. It is quite painful. It saddens me because of lack of concern and our quality of life is affected. This my story.”

PATIENT STORIES

JANUS

Champaign, Illinois

"I am a 66-year-old woman who worked for the University of Illinois at Champaign-Urbana for 25 years. During that time, I had good dental coverage and saw the dentist every year to have my teeth cleaned. In 2000, I started my own business, and could only get healthcare coverage by joining the local farm bureau. That policy did not include dental care, so I paid out of pocket for the first few years. After that, the farm bureau policy began doubling in price, until I was paying \$2,000 a month for basic coverage! I had to go in debt just to keep insurance coverage until the Affordable Care Act was finally enacted. Under the ACA, I had the best coverage of any of my policies to date. It just kept getting better. And then I turned 65. I was forced off of the ACA policy and into Medicare, which is a nightmare. In the meantime, I have not had a dental cleaning for 15 years and see no future in which I will be able to get that kind of care for myself. I would go back to the ACA policy in a second if it were legal to do so. But either way, ACA or Medicare, I am not getting the dental care that I need and deserve. A simple annual cleaning is all I'm asking to be covered. Is that really too much to ask for someone who has worked in this country since the day after she turns 16? For 50 years, I have paid taxes and added value to America. I will do that until the day I die. Now that I am a senior, I expect a safety net to catch me in times of, oh say a pandemic! My business is caring for clients' homes and pets when they travel. No one is traveling. I made \$4,000 last year, 2020. It's not looking any better for 2021. Can any of these dentists live on \$4,000 a year? I doubt it.

Surely well established dentists can be generous enough to allow Medicare patients to use their dental services."

PATIENT STORIES

NANCY

Lawrence, Kansas

“Hi. My name is Nancy. I am a 69-year old retiree. I have serious dental health problems that require an extensive treatment plan to correct. I am missing all of my back teeth — upper and lower — but the thing that most affects me is my missing front tooth. It broke off at the gum when I took a bite of an apple. I lost more than my smile that day; I went into my shell, and that’s where I am today. The broken tooth had become abscessed, and I ended up in the ER with a serious infection. That led to a visit to a local dentist. My \$1,000 Medicare Advantage Plan dental coverage went very quickly — an examination, X-rays, and an emergency referral to an oral surgeon who took me in that day for the extraction. I had to pay the oral surgeon in cash, which I had to borrow from a friend. I was told it would cost \$1,000’s, \$10,000’s of dollars to repair my teeth. I felt hopeless, hearing that.

How much would it cost for just one front tooth? What’s the cost of a smile?

I often wish I could qualify for Medicaid; it pays so much better than Medicare. If I had Medicaid, I’d have teeth. This current healthcare system is, well, it’s just unhealthy. We desperately need quality, comprehensive affordable healthcare for all, and dental healthcare needs to be included.”

PATIENT STORIES

LORENE

Shawnee, Kansas

“My name is Lorene, now 84, using Medicare since 2004 when I retired. I had dental coverage until that time. With Medicare there was no dental coverage until about six or seven years ago when Humana offered a plan. There was a large (\$200-\$300) upfront cost, plus monthly premiums. I got two exams, cleaning and X-rays, when Humana suddenly dropped the dental plan. Last year Blue Cross Advantage added dental care, but due to Covid-19 I did nothing. This year I broke off a tooth at the gum line, so needed care. Very few dentists in this area accept DentaQuest insurance, and I’m getting mixed information about what it covers. The cost for that tooth, plus removing the root and adjacent tooth, then replacing added up to \$4600 plus any other fees, etc. Because my Social Security plus State of Kansas pension are small, I live on about \$22,000 a year in the most expensive county in Kansas (because I have children here) and feel the need to be closer than I used to live. I don’t have several thousand dollars to pay for dental care. I just had an appointment at UMKC School of Dentistry to see if they will accept me as a patient. Their charges are one third to one half of what dentists in their practices usually charge. My insurance does not cover crowns, bridges or partials. I’m wondering why Blue Cross chose this company. Seniors, who are the largest group on Medicare, probably need these services more than X-Rays, cleaning and fillings which they do cover.

Dental care is one part of medical care and should be covered by Medicare, because the mouth is part of the body.”

PATIENT STORIES

DOTTIE

Joplin, Missouri

“I am seventy-nine, and have no teeth on the bottom. I went for years with a few bad teeth on the bottom, and no money to get dental treatment. I received a very small amount of money from my sister when she died five years ago. I went to one of those new dental companies that have a turnover of dentists and assistants. The dentist advised me to pull the teeth that were left, and get dentures. They gave me dentures that were grotesque, way too tall in my mouth, and would not stay in, even if I used adhesive. I went back, and they told me I would need implants to hold the dentures in place. After the two implants, from a specialist, I had spent between five and six thousand dollars, between the two places. When I went back to the dental organization, they said I needed to give them another thousand dollars for the tool to place the dentures onto the implants. By that time I was out of money to cover that additional cost. I still do not have bottom teeth.”

PATIENT STORIES

PATTY

Willow Creek, California

“My husband and I are 78 years old. We have an income of about \$60,000. In the last decade we have spent over \$50,000 on dental work, saving thousands by traveling to Costa Rica, Chapala and Tijuana, Mexico. We finally found a dentist in San Jose, CA who does implants for half of the cost of Humboldt County—but still have to travel 400 miles to get there, which we are doing next week. We are becoming exhausted and impoverished trying to maintain dental health which is recognized as the gateway to all health. Our dental bills add more than a third more to what Medicare and supplement now cost. It means we never have anything extra to do anything but get by. But without teeth... well, you know!”

JEAN

Greenfield, Massachusetts

“My ex-husband was a dentist, I used to run his office, I know how much dentists charge. They live quite well on their earnings. I am 68 and cannot retire because I can’t live on my social security benefits. I just paid my dentist \$3,500 for a single cap that needed replacement. I had no choice but to bite that bullet! It hurt! I could have lived off of that amount for the rest of this year.”

PATIENT STORIES

HOLLY

Temecula, California

"I live in Temecula, California and I have had a toothache for over three months. I was a special education teacher for forty years, but have since retired and lost my dental insurance. I cannot bear to put pressure on it or cold, and it is a dull ache the rest of the time. It is in a crowned tooth and would probably need a root canal and new crown, which I cannot afford. As long as I can control the pain with over the counter pain relievers and it does not swell up, I am OK, but my body is fighting an infection and that can eventually lead to other problems with my heart which for seventy years has been healthy. Before I had insurance I had several teeth pulled out, but I am not sure if there is enough to grasp on to in order to pull it out, and it might have to be dug out if I do not get a root canal and new crown. I have no idea how much all that would cost. Maybe someday my body will be able to conquer the infection or there will be adequate insurance through Medicare. I do not know."

BARBARA

Saraland, Alabama

"I'm a senior citizen that has Medicare. I cannot even tell you the last time I saw a dentist because it's been that long ago. I would Greatly appreciate it if dental services were added to Medicare. I wouldn't even mind paying a little extra for it. Couldn't afford a lot though. Worried about being able to afford dentures in the future."

PATIENT STORIES

SANDY

Turtle Creek, Pennsylvania

“I’m a 64 year old woman who is shut in my apartment. Instead of having friends, going places, doing things, I don’t leave my home because I have no teeth. After a horrific divorce, I lost my teeth, and cannot afford dentures. It has caused a deep depression, and loneliness. I’m 64, which I don’t feel like should be the end. I should be going to church, having friends, going places, but can’t. Due to the embarrassment and shame of not having teeth. I’m never going to be able to afford nice dentures, so this has become my life. Thank you for your time.”

PATIENT STORIES

PAULA

Anchorage, Alaska

"I live in Anchorage Alaska, am 74 years old, live on Social Security, and rely on Medicare for medical related expenses, and have been unable to find full time employment in the last six years with an employer who would offer health benefits including dental care. I have not had a yearly checkup and cleaning for over six years because I cannot afford to do so. The dental care I have received since the last checkup has been in the form of pulling teeth due to abscesses. Right now I have four cavities in as many teeth but I have not been able to afford treatment. In addition, I may have an abscessed tooth and have lost two crowns which I have been unable to replace. I understand the danger of not treating an abscessed tooth. My chewing surface has been greatly compromised and I do not have the means to prevent further damage/loss of any more teeth. My daughter said to me recently, 'What has happened to your teeth? You used to have the most beautiful teeth!'"

RICHARD

Frederick, Maryland

"I'm 88, in good health, but lacking dental care!!! For decades, no, for most of my life, I have not sought out dental care, simply because it was unaffordable. It never fit in my budget. Because of no affordable dental care even now, I'm having some difficulty chewing. I need a molar extraction, but put it off until absolutely necessary. I have had to have extractions done because I could not afford root canals. It was a no-brainer for me. Did not need any lengthy consideration."

PATIENT STORIES

CYD

Portageville, New York

“Around the beginning of the 21st century, I opted to have my entire upper teeth removed for a denture. Before that I was getting frequent infections with gum disease. Each round of cleaning, scraping and pulling was a plunge into panic over how to pay for it. I just wanted it over with. I had insurance at the time, but the price above my coverage wiped out my savings. During the weeks of my treatment, my husband had a terrible hiking accident; barely surviving a fall from a cliff. I was eventually forced to close two IRAs from previous jobs to pay for what the insurance didn’t cover.

Two years later, when we were living with my retired parents because of complete insolvency, my bottom teeth started to go. Not a surprise considering my own history, as well as my father’s gum disease. We took out a care credit loan to have the lowers pulled, and have lowers made with implanted snaps, and new uppers that they had me believe were needed. Eventually, we found out that “Care” credit wasn’t much better than check cashing companies in their rates and policies. After paying more than twice the original loan, it was payed off, but the dentures were already failing. I have fixed two missing teeth on my own, using a jeweler files to shape teeth pulled from old dentures, and several coats of super glue.

PATIENT STORIES

The dentists I consulted said my teeth couldn't be replaced, I had to buy new dentures. And this all followed an attempt by me to commit suicide. I'm still not sure I'm happy I didn't succeed. My husband has since died due to a ruptured abdominal aneurysm. I live with my sister and her husband, and our elderly mother, who requires constant care. We have to get a sitter when I need to go to appointments. That's around \$20/hr; more than any of us have ever earned.

My lowers have been flopping around in my mouth for several years now, the snaps having failed a while back. I suspect one or both sets will break irretrievably soon. In 2004, I was declared disabled due to mental illness. It was a great relief to be put on Medicare, though I rarely sought medical help for any physical ailments, because so often in the past I had been uninsured and accustomed to being unable to afford any.

This year, I obtained a Medicare advantage plan that offers \$1,000 in dental insurance, but I've been too afraid to get any estimates on dentures, since I assume the price for either set will be too much more than I can afford. Sometimes I think I would prefer not to know. I don't use credit, for unlike so many others, I know that eventually I will have to try and figure out how to pay for it, and so much more. I'll get there sometime, when I can get a ride, usually from my sister, who already has her hands full."

PATIENT STORIES

MARY

Montpelier, Vermont

"I am an 84 year old divorced white woman living in subsidized housing in Montpelier, Vermont. I have always taken good care of my teeth by driving to a Health Center over 35 miles away to take advantage of a reduced rate for low income people. Costs are going way up and my ability to drive so far with my other physical disabilities, led me to try to find a dentist who would take me in the Central VT area. A back tooth was starting to really hurt and part of the filling had given way. After two months of trying to find a local dentist at any cost and being offered appointments in 6 months or more, I returned to the Health Center where I was told that my back tooth needed to be pulled right away and was infected. I was put on an antibiotic. They were unable to pull it. My sinuses above the tooth were also very painful and infected. After calling all around again locally, I finally found a dentist 20 miles away who could take me right away. He said the tooth was infecting my sinuses. He had to take several stitches and the procedure required over an hour of work. I was barely able to drive myself home with all the bleeding and was put on antibiotics. With the two visits, the antibiotics and the extended driving, I spent almost \$1,000 out of pocket. I was able to manage it but not everyone is. The long wait and the high prices are extremely difficult for low income folks like me to manage. We need dental care and we need it NOW!"

PATIENT STORIES

GRETCHEN

Helena, Montana

"I have periodontal disease and am 71 years old. For about twenty five+ years now, I have had to have my teeth cleaned four times a year which is very expensive. I have had Blue Cross Medicare and now I have Humana. I am revisiting changing back to Blue Cross the next opportunity. But it probably won't matter. My dentist saved my life this summer when I had a very serious abscess. Medicare paid nothing for the abscess appointments and I cannot recall either Humana or Blue Cross paying one dime towards dental to help me, although they say they give me dental insurance and waste all of the paper and time on it."

RICHARD

Santa Maria, California

"My teeth situation is critical. I have spent so far this year on bridges, crowns, replacing missing teeth, etc over \$6,000 and just last year \$4,000 for many of the same things but different doctor. And I've been doing this for years and years."

Yes I am for Medicare, which I've had for over 20 years now, which includes dental, vision and hearing, etc which these professions have been fighting against just for their profits to continue with their lifestyle."

I'm lucky that I could scrape up enough money from my Social Security, small VA disability pension and retirement savings to cover these costs."

PATIENT STORIES

KYLE

Salem, Oregon

"I am on Medicare and am supporting the addition of dental care to Medicare coverage. As one ages, dental health becomes more challenging. We see more frequent occurrences of root canal (unknown \$), crown (\$600-\$1,500), the pulling of teeth (\$212-314), bone replacement graft ridge to preserve site for implant (\$621), bridge (\$3,700), uncomplicated implant (\$5,000), dentures (unknown \$), complicated implant with sinus lifting (\$5,000+). We also have prophylaxis treatments, cavities, imaging, etc.

I have to have 3 cleanings a year which includes prophylaxis treatments. I have a dry mouth problems (common for us old people) that hastens the development of and progression of dental caries. My teeth are deteriorating rapidly due to the dry mouth problem. A foundation tooth for my bridge just failed so I lost the bridge and the foundation tooth.

Because I lost the foundation tooth, I can't replace the bridge... I will need two implants that will require a sinus lifting procedure to build up the bone (bone grafting). The cost of this process will likely exceed \$12,000. I also need an implant with sinus lifting and bone grafting on my other side (\$7,000). I am trying to save other teeth and crowns at this time due to cavities that are progressing. My dental costs this year are already exceeding \$4,000. This is just to give you a feel for what I am having to deal with this year."

PATIENT STORIES

H.J.

Chicago, Illinois

“I am a prospective patient who lost most of two front teeth as a teenager. After nearly 35 years, one crown failed while leaving some of the original tooth stub attached to crown. The other crown is expected to fail soon with similar results. Replacement crowns are not possible and the option of removing many more teeth for a partial denture is functionally unacceptable. Because I am in my early 60s and in relatively good health, I am a reasonably good candidate for a double implant. However, with private dental insurance, my out-of-pocket costs are estimated to be over \$10K. I am delaying this treatment because of the enormous financial burden this represents now... and in the future. This delay is difficult to justify medically because I also have periodontal disease which is stable now due to aggressive treatment. As I get older, the possibility of a decline in periodontal health combined with increasing dental problems related to prior unchecked disease means that my candidacy for successful front teeth implants decline. Many of my natural teeth are capped and I know that I will face similar difficult choices in the future. How can I possibly plan to move forward with having front teeth implants done knowing that I will face even more unaffordable dental costs after retirement because I will have no insurance?”

PATIENT STORIES

EDWARD

Chicopee, Massachusetts

"I am 73 and pay \$61.85 per month for dental insurance. This combined with hearing aid costs \$6,300 (total out of pocket), vision care, Part D prescriptions, and paying for supplemental health care (\$107.74 a month) is costing me a great deal of money, and it has been extremely difficult to pay for all this out of pocket. I need all this to keep myself healthy into my older age and I only live on Social Security which needs a stronger increase in payments. Even though I have a Master's degree, not all jobs provided me with enough health insurance when I was younger. For a rough total of 23 years I went without or very little dental insurance which affected the health of my teeth and mouth and cost me a lot of money when I didn't have enough for other expenses. After my retirement I had to declare bankruptcy due to health care costs. Employer provided health insurance is simply not adequate in our society. Medicare needs to be updated since so many of us in older age are low income with low savings."

RANDALL

New Orleans, Louisiana

"I have needed 3 dental implants for many years. I saw an oral surgeon who would do the implants and a dentist who would make the crowns and connect them to the posts. Both charges were over \$10,000. I went to the Louisiana State University dental school where they supposedly provide affordable services and they wanted over \$14,000.00."

PATIENT STORIES

CARLA

Cleveland Heights, Ohio

“I am fortunate to be retired and relatively healthy, but medical and DENTAL bills are exerting great pressure on my finances. Although I have Medicare, the co-pays and deductibles with my plan are onerous, and of course, dental isn’t covered at all.

In the last two years, I paid \$7,000+ for a tooth extraction, implant and crown. Now the implant is failing due to bone loss around it. The tooth behind the implant will have to be extracted, and the dental surgeon will attempt a bone graft using material from a cadaver (yuck) to shore up what remains of my own bone. This will cost another \$1,400 to \$1,700 depending on the anesthetic I choose, and including a discount for paying with cash or check.

I have a 40-year old bridge in my mouth, and when it goes, that will mean either another bridge or another implant, with similar costs and no guarantee of outcome.”

PATIENT STORIES

DOUG

South Bend, Indiana

"I saw my dentist earlier this year. I knew I needed work done. After doing a full set of x-rays, he told me that he didn't feel comfortable doing the work that was needed. He compared it to him attempting to do brain surgery... I did find a dentist in Valparaiso, Indiana who is a specialist in this area. He verified the cost of the work to be done, which was \$40,000-\$50,000 dollars.

I asked my dentist in Glen Ellyn about dentures. He felt uncomfortable with that option because my roots are in good shape. I also asked about implants, and he was not in favor of that either. Also, in looking up the cost of implants, they were virtually the same as seeing the prosthodontist. So, that informed my decision. Unfortunately I do not have anywhere near the funds to finance the procedure. That's why I need insurance to pay for it!"

PATIENT STORIES

MARY

Zionsville, Indiana

“My husband and I live in Zionsville, IN and are both on Medicare. For 2021, Jay was basically forced onto a Medicare Advantage Plan that included our local dental school to get “affordable” dental care. He needs implants to replace some of the 5 teeth he has had pulled, despite always having dental care and private insurance previously. Currently a new graduate dentist treats Jay because we absolutely can’t afford a board certified periodontist/prosthodontist. This new graduate dentist has messed up some costly work already (and yes, we still had to pay for it, notably a tooth that needs an implant but can’t have one in its current condition). His dental rider (which costs an extra \$25/mo) pays zero for the titanium implant posts and only 50% for most of the rest of his care. We just now broke even with the extra rider premiums. Jay will be stuck with the same plan next year, too, because he has not had a single implant put in yet. He has lost 5 teeth, but only has enough bone for 3 implants, and he’s only 66. Not 86. Seniors deserve better, since poor dental health causes premature death.”

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