# NEVADA GOVERNOR’S COUNCIL ON DEVELOPMENTAL DISABILITIES

## **DRAFT Position on Dental Care**

**Introduction**
Oral health is a fundamental component of overall health. It encompasses the ability to speak, eat, smile, and live without pain or infection. For individuals with intellectual and developmental disabilities (I/DD), oral health is not only a matter of physical wellbeing, but also directly influences quality of life, communication, nutrition, social participation, and autonomy. Yet, people with I/DD disproportionately experience poor oral health outcomes and face significant barriers in accessing quality, affordable, and respectful dental care.

**Challenges Facing Individuals with I/DD**
Of the nearly 7.3 million adults with I/DD in the United States, approximately 4.5 million rely on Medicaid for health coverage. However, Medicaid dental coverage for adults is not mandatory and varies widely between states. Currently, twelve states do not provide basic adult dental benefits, and of those, only seven offer limited waiver programs. In addition, there is a critical shortage of dental providers trained and willing to serve individuals with I/DD, particularly those with complex medical or behavioral needs.

Individuals with I/DD are at increased risk for:

* **Oral disease and complications**, including malocclusion, delayed tooth eruption, enamel hypoplasia, oral trauma, and missing teeth.
* **Tooth decay and periodontal disease**, due to contributing factors such as frequent use of sugar-containing medications, oral aversions, limited dexterity, reliance on caregivers for hygiene, reduced saliva production, high-carbohydrate diets, or use of liquid/puréed diets.
* **Damaging oral behaviors**, such as bruxism, mouth breathing, tongue thrusting, self-injurious behaviors (e.g., lip biting, gingival picking), and pica (eating non-food items).

The NGCDD believes that comprehensive health care must provide affordable dental coverage, improved quality, and better cost control, while addressing the significant oral health care disparities faced by individuals with developmental disabilities. In addition to improving access to quality dental care for persons with I/DD, the health care system must improve the way our State provides access to oral health care services, such as referrals to affordable and qualified medical professionals, education on preventative oral healthcare measures, and education to providers on providing services to people with I/DD.

### Policy Recommendations:

Comprehensive dental care must adequately address the following:

* Access to affordable oral care coverage for Nevadans with developmental disabilities, removing any bias based on pre-existing conditions, congenital impairments, or whether the intervention is preventative in nature.
* Assure greater access to quality care by dental care providers trained to meet the medical needs of individuals with developmental disabilities. This shall include increased training and continuing education opportunities for dental providers focused on serving individuals with I/DD, including behavioral supports, sensory accommodations, trauma-informed care, and communication strategies.
* Provide appropriate, accessible, and convenient dental care for individuals with developmental disabilities. Dental care settings shall offer accommodations based on individual needs, and care shall be delivered in environments that reduce anxiety and sensory overload, including options for community-based and mobile care.
* Ensure all policies and programs result in the creation of equal treatment in dental care services to all individuals. This includes providing accessible information about dental coverage, clearly explaining benefits and out-of-pocket costs before any procedure, and offering supplemental insurance options when services are not fully covered.
* Beginning in youth, encourage inclusion of individuals with I/DD in education, prevention, and wellness programs for dental care. Oral health education shall be integrated into school and community programs and delivered in accessible formats appropriate to the developmental level of the individual.
* Develop and strengthen the “medical home” model to meet the dental care needs of individuals with I/DD. The “medical home” model is a person-centered, coordinated approach to healthcare in which a team of providers works together to meet the individual's physical, mental, and oral health needs. This model should ensure access to dental professionals as part of a comprehensive care plan. Information about the medical home model should be made available to individuals with I/DD and their support networks.
* Support the development and continuation of programs that provide education to dental care professionals on the needs of individuals with I/DD. Ensuring that all training programs include content on patient rights, informed consent, and communication strategies that promote autonomy. Individuals with disabilities shall be involved in the design and delivery of these trainings whenever possible.
* Ensure that individuals with disabilities are fully involved in their dental care decisions. Providers must offer information in accessible formats, explain procedures and benefits clearly, and respect the individual's right to give or withhold consent. Autonomy and self-determination must be upheld at every stage of care.