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Design matters –
Trends for dental and vision benefits

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Through the years we’ve learned that many employees want to be involved in decisions regarding their benefits. They prefer to compare several plans to find coverage options that will best meet their needs. But under the Affordable Care Act (ACA), insurance plans offered by some states or exchange marketplaces may have limited options and plan features for medical insurance, and dental and vision insurance may not be customized to fit employees’ needs.

One Plan May Not Fit All Needs

Employers and employees recognize that one-size-fits-all dental and vision plans rarely “fit all” the dental and vision health requirements of employees and their family members. Although employees recognize the value of preventive care, they also are interested in other services that help them improve and take care of their oral and vision health throughout each stage of life.

Pediatric Requirements

The ACA focuses on dental and vision care needs for people under age 19 in most states. It requires medical insurers to offer Essential Health Benefits (EHB) packages to individuals and employers of fewer than 50 eligible employees that choose to provide benefits. The deadline for meeting ACA requirements has been adjusted more than once. At this point, it’s up to the states to decide whether or not small group medical insurance policies must comply with new ACA requirements prior to Oct. 1, 2014. Larger employers offering benefits to employees have until 2015 to meet the ACA employer-mandate insurance obligation.

Dental and Vision for Adults

Many families today need flexible dental and vision coverage. Since EHB packages from medical carriers may cover only pediatric family members, employees will need to purchase dental and vision plans separately for themselves and their dependents age 19 and older. This means that within a family, there could be different needs for dental and vision benefits and services:

• Adults often notice changes in their oral and vision health as they age, which may require services beyond preventive care to help them enjoy good overall health in their senior years.

• Pediatric family members may need additional dental coverage for special needs, including orthodontia, because EHB packages may cover only medically necessary orthodontia, such as cleft-palate conditions.

• Dependents age 19 and older may have special vision or dental needs – such as LASIK, purchasing new eyeglasses annually, or teeth whitening coverage – in addition to routine dental and vision exams.

Many health professionals are concerned that with the requirement for pediatric EHB packages, parents will purchase dental and vision coverage for their children, but not for themselves. Employees may be concerned about benefit costs and believe they can save money by deferring purchase of their own dental and vision coverage. But by doing so they may miss early detection of conditions and face increased risks of developing serious health concerns and incurring significant bills for medical services. Producers and employers need to educate employees on the value of dental and vision coverage and the wisdom of paying a small monthly fee for insurance to protect their health and that of their family members.
Value of Stand-Alone Dental and Vision Plans

Under the ACA, stand-alone dental and vision plans remain viable benefit choices for employers and employees. Typically stand-alone plans are offered by carriers that are experts in these benefits, which means the premium costs are accurate, benefits can be customized, and customer service and claims processing systems are designed specifically for these products. Some also have a nationwide, credentialed provider network.

Dental or Vision with Medical Plans

One of the choices available to consumers may be a medical plan combined with dental and/or vision benefits offered at a discount. But this option may not produce the expected results. While a combined plan may seem cheaper (one premium), it could lack important benefit components and anticipated cost savings for treatment.

Dental and Vision Trends for 2014

Under the ACA, insurance choices can be confusing, giving brokers and consultants an opportunity to work closely with employers to help them understand reform mandates, public marketplaces, private exchanges or traditional benefit options. They also can assist with educating employees about their dental and vision plan choices.

When reviewing dental and vision benefits, carefully evaluate the carrier options, coverage choices, flexibility in plan designs, PPO network and customer service. Partnering with the right carrier will go a long way toward helping employees maintain a healthy and satisfied workforce.

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for dental and vision health stats, see the next page
Dental and Vision Health of Americans

Over the past decades, there have been many changes to dental and vision coverage, but it is important to remember that the needs of Americans have not changed. The following statistics provide a picture of dental and vision health in the United States.

**Dental**
- Nearly 25 percent of adults ages 20 to 64 describe their oral health as excellent to very good, compared to 14 percent who report their oral health as poor.
- 69 percent of adults ages 20 to 64 have been to the dentist in the past year; 12 percent have not been to the dentist within the past five years.
- The American Dental Association reports a decline in the number of adults visiting the dentist (41 percent in 2003 to 37 percent in 2010).
- Hospital emergency rooms received more than 2 million visits for dental problems in 2010. Unfortunately, emergency treatment does not provide preventive care and early detection of serious medical concerns.
- Dental caries (tooth decay) remains the most prevalent chronic disease in adults, even though it is largely preventable. Nearly one-fourth of adults, ages 20 to 64, and at least 15 percent of children, ages 6 to 19, have untreated caries.
- Periodontal disease is the most common cause of tooth loss among adults. Fortunately, the prevalence of both moderate and severe periodontal disease in adults and seniors has decreased since the early 1970s.
- Approximately 30,000 Americans are diagnosed annually with oral cancer, which affects the mouth and/or pharynx, but it is preventable and treatable if detected at an early stage. The risk of oral cancer increases after age 50 and peaks between ages 60 and 70.

(Source: National Association of Dental Plans)

**Vision**
- More than one-third of people age 40 or older struggle to see clearly, even when wearing prescription eyeglasses. About 25 percent of employees say they need to take breaks while working due to tired or irritated eyes. These vision issues can impact employee productivity.
  - At least 182 million Americans use some form of vision correction.
  - 49.7 million Americans have more than one pair of prescription eyeglasses.
  - 28 million Americans wear over-the-counter reading glasses.
- Nine out of 10 employees recognize that vision benefits will become more important as they age, and they want plans that will provide the latest in vision technology.
- Many people are unaware that during an eye exam, several eye diseases and potential serious health concerns can be detected at an early stage, which is important for prevention or successful treatment.
  - More than 24.4 million Americans age 40 and older are affected by cataracts.
  - Glaucoma affects more than 2.7 million Americans age 40 and older.
  - More than 2 million people age 50 and older have advanced forms of age-related macular degeneration, which may lead to severe vision impairment if left untreated.
  - Diabetic retinopathy affects nearly 7.7 million Americans age 40 and older.

Sources: Transitional Optical, Employee Benefit News, Vision Council of America, American Academy of Ophthalmology)