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## Can Dental Insurance Transform Essential Dental Care in India??- Assessing the Role of Oral Physicians: A Cross-Sectional Study and Review

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### **Abstract:**

Over the last 50 years India has achieved a lot in terms of General Health Insurance, but comprehensive Dental Health Insurance is almost non-existent. But with growing awareness about dental care among consumers there is a need for dental coverage. The study was conducted to explore the role of Oral Physician to facilitate the design, implementation and claim settlements by health insurance companies because of their first hand knowledge in the process of diagnosis, investigation and treatment plan.

### **Aim of the Study:**

- Health insurance companies for the awareness and feasibility of dental health insurance policy in India
- Role of Oral Physician was assessed to provide expert opinion for dental insurance policy
- To evaluate the opinion of patients regarding usefulness of Dental Insurance

### **Material & Method:**

A survey was performed through a questionnaire which was answered via electronic and personal communication by 30 executives of health insurance companies, 45 private practitioners and 50 patients.

### **Results:**

We found that only ICICI LOMBARD and APOLL DKV provided dental insurance. None of the executive was aware of Oral Physician and thus unaware regarding the role an oral physician can play in dental insurance and 100% practitioner were in favor of dental insurance.

**Keywords:** General Health Insurance, Dental Health Insurance, India

### **1. Introduction**

Over the last 50 years India has achieved a lot in terms of health improvement. But still India is way behind many fast developing countries such as China, Vietnam and Sri Lanka in health indicators (Satia et al 1999)<sup>1</sup>. In case of government funded health care system, the quality and access of services has always remained major concern. A very rapidly growing private health market has developed in India. This private sector bridges most of the gaps between what government offers and what people need. However, with proliferation of various health care technologies and general price rise, the cost of care has also become very expensive and unaffordable to large segment of population.

Dental care is a very important part of our modern life today. Having a great smile can instill confidence, self-pride and a feeling of accomplishment. From young children to adults, our teeth are very important to us<sup>1</sup>.

Unlike most western countries, specific dental insurance plans are not common in India. In India, oral health is normally integrated with the general health insurance schemes. However, some popular tooth care product companies have forged tie ups with general or health insurance companies to produce dental insurance products<sup>1</sup>. Through this study we wish to explore the status of Dental health insurance in India. The opinions of Insurance executives, the dental patients and the dental practitioners were surveyed. A determination of what advantages can it have in the health sector was attempted and the role of an Oral Physician was clarified in implementation of the dental insurance<sup>1,4</sup>.

## 2. Role of Oral Physician in Dental Insurance

An oral physician is a dentist who is adequately trained in medicine, radiology and applied pathology to manage a variety of stomatological disease that fall outside the scope of routine dentistry.

### 2.1. Role in Policy Making

- How government funds will be utilized for poor and middle class in India
- Appointing dental officers at Primary Health Care centres
- Tie ups with corporate hospitals for treatment of the poor patients , following the Economist Model proposed by Dr Devi Prasad Shetty

### 2.2. Role in Co-Ordinating with Government and Private Hospitals

*How to Determine the Level of Poverty and consequent payment of premium*

### 2.3. Role in Auditing Procedures

*Related to the Dental Insurance Claims*

## 3. Aim of the Study

The aim of our study was to evaluate

- Health insurance companies for the awareness and feasibility of dental health insurance policy in India
- Role of Oral Physician was assessed to provide expert opinion for dental insurance policy
- To evaluate the opinion of patients regarding usefulness of Dental Insurance

## 4. Methods and Materials

A survey was performed through a questionnaire which was answered by the 30 executives of various health insurance companies, 45 private practitioners and 50 patients

## 5. Results

### 5.1. Health Insurance Executives

Health insurance executives of various insurance companies were questioned about the availability of various dental insurance policies and their awareness about the role of oral physician in formulating policies and there execution

- In our survey we found that only ICICI LOMBARD and APOLL DKV provided dental insurance
- But none of the executive was aware of Oral Physician and thus unaware regarding the role an oral physician can play in dental insurance

### 5.2. Private Practitioner

Private practitioners were questioned about their awareness for dental insurance and their views regarding this were taken through a questionnaire

- 100% practitioner were in favor of dental insurance and thought it to be beneficial for the patient
- However only 20% were aware of existing dental insurance plan
- Around 83% were in favor of dental insurance for both regular and cosmetic dentistry and 87% believed that Oral Physicians should be consulted in the formulation and execution of these policies

### 5.3. Patients

Patients were also questioned regarding the importance and utility of dental insurance

- Around 73% of the patients were seeking treatment in private hospitals /clinics due to limited treatments available in government hospitals and found dental treatment to be unaffordable
- None of the patient was possessing any dental insurance plan and were not even aware of Dental insurance plan and around 90% were in favor of implementation of dental insurance plans

## 6. Discussion

Time has shown that the practice of dentistry is influenced by the method of payment. Dental treatment plans may have multiple treatment options with varying costs to both patient and practitioner. Dental health insurance is a very good tool to promote dental health. The question is who among the various specialists of dentistry can be approached for advice in case of dental insurance<sup>2</sup>.

Formulations and execution of dental insurance policies needs to be guided by an oral physician who is bestowed with in-depth knowledge in identifying the disease, good diagnostic ability logistic use of various investigative tools to come to a diagnosis. Thus an Oral Physician can play a very important role in the field of Dental Insurance and can provide valuable guidance to both the claimants as well as to the provider.

### 7. Dental Health Insurance in USA

The dental health insurance in America is under the regulation of norms formulated by the members of American Dental Association. In the 1960's, 4.5 million Americans had dental insurance which increased to 100 million in the 1980's<sup>6</sup>.

There are two types of dental insurance available in USA<sup>4</sup> –

- **FEE FOR SERVICE**<sup>8</sup> - FFS is the dominant physician payment method. Payment is dependent on the quantity of care, rather than quality of care
- **MANAGED CARE PLAN**<sup>8</sup> - Variety of techniques intended to reduce the cost of providing health benefits and improve the quality of care
- Managed care in dentistry has existed in U.S since 1954 union health plans but fee-for-service. In dentistry, managed care is an improper term 'managed cost' is a better representation of its function because managed care's goal of capitated financing and discounts on fee schedules.
- **OBAMA CARE**<sup>16</sup> - In May 2007, US President Barack Obama came up with a sweeping health care plan that would provide every citizen a means for coverage and calls on government, businesses and consumers to share the costs of the program. Obama's plan retains the private insurance system but injects additional money to pay for expanding coverage. It would also create a National Health Insurance Exchange to monitor insurance companies in offering the coverage. Those who can't afford coverage would get a subsidy on a sliding scale depending on their income, and virtually all businesses would have to share in the cost of coverage for their workers. Obama's package would prohibit insurance companies from refusing coverage because of pre-existing conditions.
- **MEDICAID**<sup>9</sup> - usually covered the preventive and restorative aspects of the dental care in US, but due to fiscal difficulties it was curtailed in the last year. Now reports indicate that this dental insurance will be restored in coming year from Jan 01, 2014.

### 8. Dental Health Insurance in Sweden

In Sweden since 1938, school-age children have been protected by a dental care program under the supervision of the National Board of Health<sup>15</sup>.

The program has provided for<sup>14,15</sup> -

- The systematic and free dental care of children aged 6-16 on a once-a-year basis
- Treatment at reduced prices for those aged 17-19
- The treatment of adults at specified rates
- Pregnant women were entitled with 75 percent of cost reimbursed according to a dental fee schedule
- The 1973 legislation provides dental insurance for all persons aged 20 and over
- The dental care program will be responsible for the free dental care for every citizen who is nineteen years of age and below.

It may be noted that health care is completely regulated by the Government in Sweden and private practice is not allowed. Recently however some change in policies has been seen, but only the very rich can afford private practitioners in dentistry.

### 9. Dental Health Insurance in U.K

Since 1948 dental care in U.K. has been included under the National Health Service (NHS) which is largely funded through general taxation<sup>5,6</sup>

There are three types of dental insurance plan available in U.K

- **General Dental Service (GDS)**
- **Community Dental Service (CDS)**
- **Hospital Dental Service (HDS)**

Most patients contribute to the cost of GDS dental care through co-payments. Children less than 18 years old, pregnant or nursing mothers receive general dental care without any patient charge. The CDS provides dental services to special groups (such as special needs children) or where access to the GDS is poor<sup>10</sup>. Access to hospital-based acute dental services (such as dental surgery) is free<sup>3</sup>

### 10. Dental Health Insurance in India

Currently, insurance companies offer limited coverage for a few dental procedures under general health insurance plans. Most insurance covers are only for dental treatment involving 24-hour hospitalization or life-threatening situations. There are no comprehensive stand alone plans for dental treatment<sup>11,13</sup>.

There are many insurance policies available in India. Though the policies and features differ from one company to another, there are some of the common and generalized features of dental insurance in India<sup>11</sup>.

The various plans available in India are<sup>11</sup> –

- Stand Alone
- Dental Insurance In Collaboration With General Health Insurance
- Fee For Service

### 10.1. Stand alone dental insurance plan

It covers the expenses such as periodontitis and extraction of permanent teeth due caries etc. In this plan, the amount of expense to be reimbursed as well as the period of such cover is fixed. The plan is generally provided by the popular dental care product companies in association with one of the insurance companies.

HINDUSTAN Lever on 9th Oct 2002 had announced the launch of 'Pepsodent Dental Insurance', in partnership with New India Assurance wherein every purchase of Pepsodent toothpaste enabled the customer to get Rs.1, 000 worth of free dental insurance. Under this initiative, consumers were offered insurance cover against expenses for the extraction of permanent tooth due to severe caries and periodontitis, including cost of medication.

### 10.2. Dental insurance cover as part of general health insurance plan

This is provided by the general insurance companies as part of their own general health insurance schemes, such as health advantage policy or student medical policy. Through this scheme, one can claim dental expenses along with the other kinds of reimbursements, such as the cost of medicines or hospitalization. This plan also offers tax benefits up to a certain fixed amount under the income tax act.

### 10.3. Fee-for- Service dental insurance coverage

This accounts for certain percentage of savings on the charges claimed for dental treatment procedures

- The person covered under the dental insurance policy can visit the dentist concerned and pay a discounted service and consultancy charge
- Freedom to change the dentist licensed by the insurance company according to his/her preferences and conveniences without even notifying the insurance company.

### Preventive Healthcare Card

*NHO(National Health Organization) has dentists who are empanelled as per a criteria laid down by an Accreditation Committee that looks at parameters such as Qualification, Experience, Awards/Recognition, Good Will in the area of Operation, Clinic Hygiene Standards etc<sup>12</sup>.*

#### Benefits to the NHO Cardholders:

- Free consultation.
- 50% discounts on cleaning, polishing, X rays. Discounts on all further treatments & consultations
- Free dental cleaning/scaling (basic oral prophylaxis treatment - ultrasonic cleaning & scaling) shall also be offered as a welcome benefit to the primary card holder.

### 11. Conclusion

India is the largest democracy and the second most populated country in the world and more than 70% of India resides in villages. Dentistry faces serious problems regarding accessibility of its services to all of India but the major missing link is the absence of a primary health care approach. To address this problem, oral physicians, insurers, NGO's and other stake holders such as consumers, and most importantly, central and state legislatures will have to work together.

The government can channelize money in rural areas by issuing health cards .In India we can follow the Swedish model for school children and pregnant ladies. We as oral physicians should come forward to promote dental health insurance in our country by becoming a bridge between the insurance companies and the patients so that dental treatment becomes accessible to one and all.

### 12. Conflict of Interest

No conflict of interest

### 13. References

1. Raju HG. ORAL HEALTH INSURANCE IN INDIA. Annals and Essence of dentistry, Vol. - II Issue 4 Oct– Dec. 2010
2. <http://timesofindia.indiatimes.com/arcicleshow/24770762.cms>. Accessed on August 2010
3. sitagita.com/medical-care/dental-insurance, accessed on Aug- 2010
4. Jonathan Shenkin. The future of dental managed care in the US. Health Policy 47 (1999) 225–239
5. Parliament of Australia .Dental reform: an overview of universal dental schemes;2012
6. MacEntee MI. Missing links in oral health care for frail elderly people. J Can Dent Assoc 2006; 72:421- 425
7. S.J.Nagda, Dental Insurance Editorial. The Journal of India Prosthodontic Society. March 2008 : 8(1)
8. Jonathan Shenkin. The future of dental managed care in the US. Health Policy 47 (1999) 225–239
9. Beth Kaiman- Dental care for adults on Medicaid to restart Jan. 1 The Seattle Times October 10, 2013
10. Carol Propper. The demand for private health care in the UK. Journal of Health Economics 19 2000. 855–876
11. IRDA Hyderabad report series 2006-07.
12. <http://www.nationalhealthorganisation.com/index>
13. Ahuja N.K. et al. Demographics & Current Scenario with Respect to Dentists, Dental Institutions & Dental Practices in India. Indian Journal of Dental Sciences. June 2011 Issue:2, Vol.:3

14. EU Manual of Dental Practice: version 4 (2008)
15. Albert H. Rosenthal, The Social Programs of Sweden: A Search for Becuritu in a Free SocEety, Minneapolis, University of Minnesota Press, 1967.
16. Scott Conroy. Obama Unveils Universal Health Care Plan. CBSNEWS. May 29, 2007, 12: 33 PM