

THE STATE OF VETERAN ORAL HEALTH IN IOWA

Understanding Outcomes and Opportunities for Improving
Oral Health and Well-Being for Iowa Veterans

Prepared by the American Institute of Dental Public Health in support of the Delta Dental of Iowa Foundation

EXECUTIVE SUMMARY



20 Million United States Veterans

National Access

There are 20 million veterans in the U.S. Of those, nine million receive healthcare from the Veteran Health Administration (VHA). Only 1.5 million are eligible for dental care from the VHA, with just 512,000 receiving dental care. This means most veterans who are receiving medical care through the Veteran's Administration (VA) system are not eligible or able to receive dental care through the VA. Most veterans, including those living in Iowa, get their dental care in the private sector resulting in access and affordability concerns.



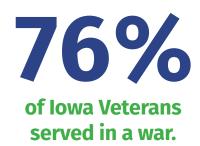
1.5 Million Veterans Eligible for VHA Dental Care



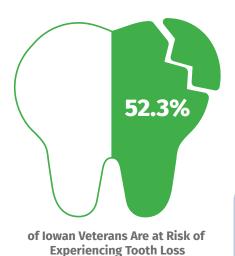
512,000 Veterans Receive VHA Dental Care

Iowa Access

Approximately 7.9% of Iowans are veterans. As of 2020, Iowa had 193,861 veterans living in its 99 counties, with 76% having served during a period of war and approximately 184,000 enrolled in the Iowa VA healthcare system. Iowa veterans are experiencing poverty and housing insecurity at higher rates than nonveterans in Iowa. Geographically, Iowa veterans are highly concentrated in rural areas, with a large proportion of those veterans considered to be among the aging community. Veterans are also more likely to live in a Health Professional Shortage Area (HPSA).



= 1 Million Veterans



Oral Health of Iowa Veterans

Most oral health indicators show that Iowa veterans have poorer oral health outcomes than nonveterans. Approximately half of Iowan veterans (52.3%) are at risk of experiencing tooth loss, compared with 37.1% of nonveterans. Nearly one in ten Iowa veterans (9.5%) are completely edentulous, compared with 4.4% of the Iowan adult population. Indicators such as income, education, and age exacerbate those disparities; however, rurality is the largest driver of poor oral health among veterans.

Nearly one in ten Iowa veterans (9.5%) are completely edentulous.



EXECUTIVE SUMMARY

Chronic Disease Conditions in Iowa Veterans

lowa veterans are more likely to report multiple days a month with poor physical health: more than one in ten lowa veterans experienced 14+ days per month of poor physical health. Veterans in rural lowa experience a diabetes prevalence rate of 17.6%. Heart disease prevalence among veterans in lowa is also a major cause for concern. In lowa, heart disease impacts 16% of all veterans — almost three times the national average (5.5%). There are significant economic implications for untreated oral disease in the management of chronic medical conditions, including diabetes and heart disease. Approximately \$55 million can be saved annually in medical costs by providing dental care to lowa veterans with diabetes. When evaluating the 16.1% of lowa veterans with heart disease, approximately \$66 million can be saved annually in medical costs by providing dental care.



More Than One in Ten Iowa Veterans Experienced 14+ Days Per Month of Poor Physical Health.



17.6% of Iowa Veterans Experience Diabetes and 16% of Iowa Veterans Experience Heart Disease.



Can Be Saved Annually In Medical Costs By Providing Dental Care to Iowa Veterans With Diabetes.

Strategic Recommendations

Stakeholders in Iowa can improve the oral health and wellbeing of veterans by investing in strategic opportunities to improve access and quality of care.



Strengthening and expanding the Iowa Veteran Trust Fund allows for necessary financial support in addressing unmet need while reducing high out-of-pocket costs for veterans.



The I-Smile program has successfully navigated patients into care using Trust Fund support, creating a successful collaborative among these two opportunities.



Increasing Medicaid rates and expanding eligibility for veterans in Iowa can incentivize providers in the care delivery process with the potential to reduce high emergency department visits and medical costs.



Lastly, the paucity of both veteran- and oral health-specific data creates a gap in the knowledge base which impedes the ability to make further evidence-based recommendations. Improving the data collection and monitoring systems will allow stakeholders to define and implement state-based strategies that improve the oral health and wellbeing of lowa veterans.

Join the Iowa Listening & Learning Session on Policy 4/29/24!



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