

PREVENTABLE ORAL HEALTH EMERGENCY DEPARTMENT VISITS

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INTRODUCTION

Oral health care is not commonly covered by medical insurance and even when individuals have dental insurance, non-preventive dental services are often subject to significant cost sharing. In 2023, Massachusetts residents reported dental care as one of the most common services that led to difficulties paying family medical bills.¹ These cost barriers have access implications, including delaying care, which may lead to individuals presenting to the emergency department (ED) for preventable oral health conditions.

OBJECTIVES

The Massachusetts Health Policy Commission (HPC) sought to track preventable ED visits for oral health conditions to better understand statewide access to general dental care. Understanding patient demographics for this population is important for health equity and could help target interventions to populations that could most benefit from policy intervention.

STUDY DESIGN

This study used guidance from the Association of State and Territorial Dental Directors (ASTDD) to characterize ED visits for non-traumatic dental conditions (NTDCs) in the Center for Health Information and Analysis (CHIA) Emergency Department Database. This ASTDD guidance further categorizes NTDCs into dental caries (tooth decay), periodontal disease, and associated preventive procedures (CPP)², which are routinely provided in a primary general dental clinic setting. Other diagnoses are categorized as non-CPP.

ED visits for NTDCs are explored by age group, race and ethnicity, payer, income quintile, and geography. Geographic exploration used HPC-created regions, which are based on the Dartmouth Atlas Hospital Service Areas.³

The study population included ED visits for NTDCs in Massachusetts from 2016 to 2025, totaling 269,452 ED visits.

RESULTS

Although most ED visits for NTDCs are CPPs (visits related to care that would otherwise be provided in a primary general dental setting) the share of NTDCs that are non-CPP increased by over five percentage points from 20.1% in 2016 to 25.3% in 2025. ED visits for NTDCs fell by 39% in the pre-pandemic period from 2016 to 2020 (**Exhibit 1**). However, from 2020 to 2025 there was an increase of 10% from 21,946 visits to 24,096 visits.

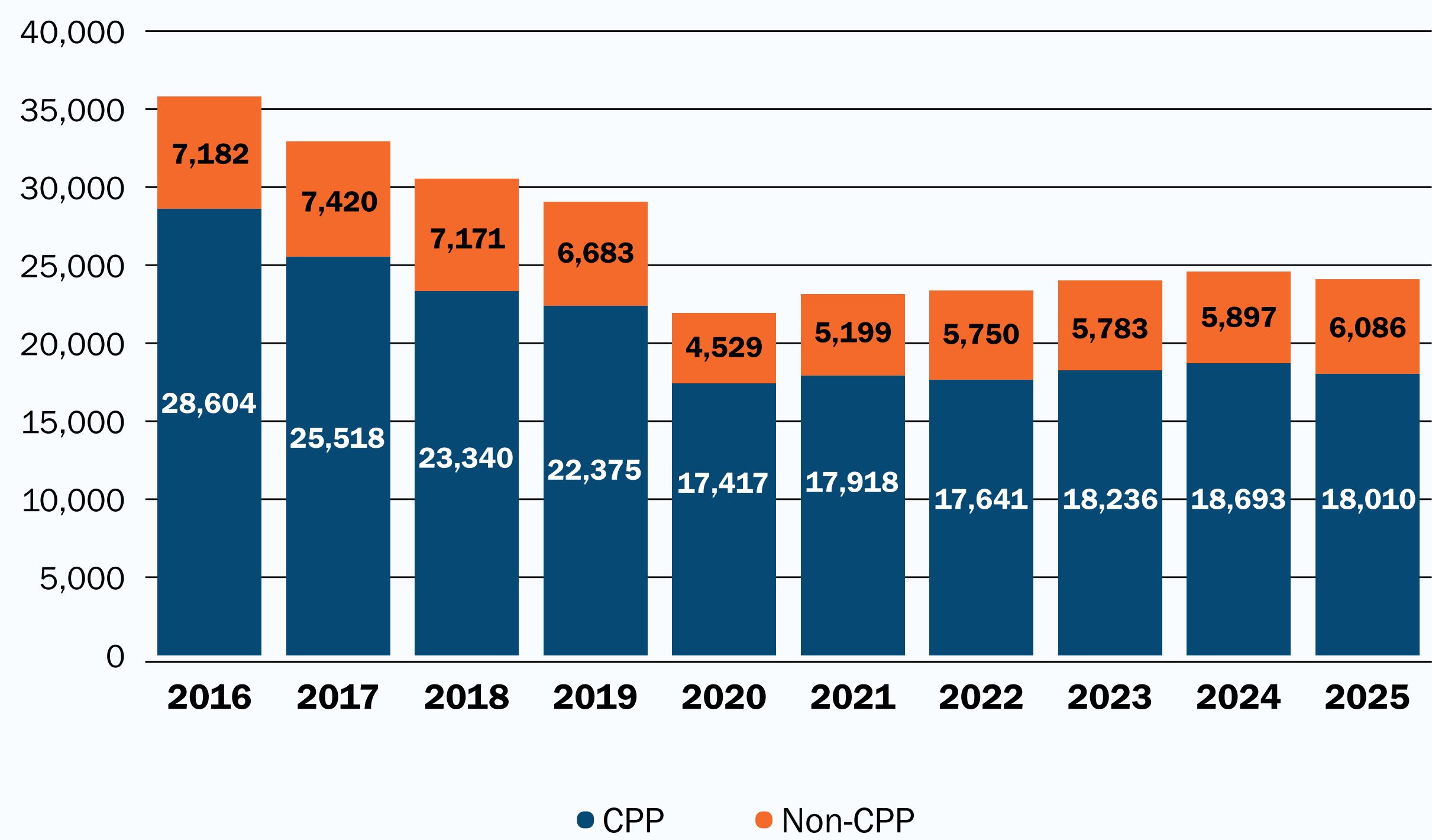
In 2025, most age groups experienced fewer than 3 ED visits for NTDCs per 1,000 individuals, with ages 10-14 having the lowest rate at 1.4 visits. Visits for NTDCs were most common among ages 35-44 compared to other age groups, with 5.4 ED visits for NTDCs per 1,000 individuals.

The rate of ED visits for NTDCs among Black non-Hispanic individuals in 2025 was nearly 3.5 times higher than the rate for White non-Hispanic individuals (**Exhibit 2**). The ED visit rate per 1,000 individuals declined by only 5.5% from 2019 to 2025 for Black non-Hispanic individuals, while White non-Hispanic individuals saw a decrease of 22% during that same period. Individuals in the lowest income quintile had the highest number of ED visits for NTDCs in 2025 but also had the greatest decrease (24%) from 2019 to 2025.

Individuals with Medicaid had the highest share of ED visits for NTDCs in 2025: 50% higher than commercial and twice the share for individuals with Medicare. Shares of ED visits for NTDCs did not change substantially for any payer from 2019 to 2025.

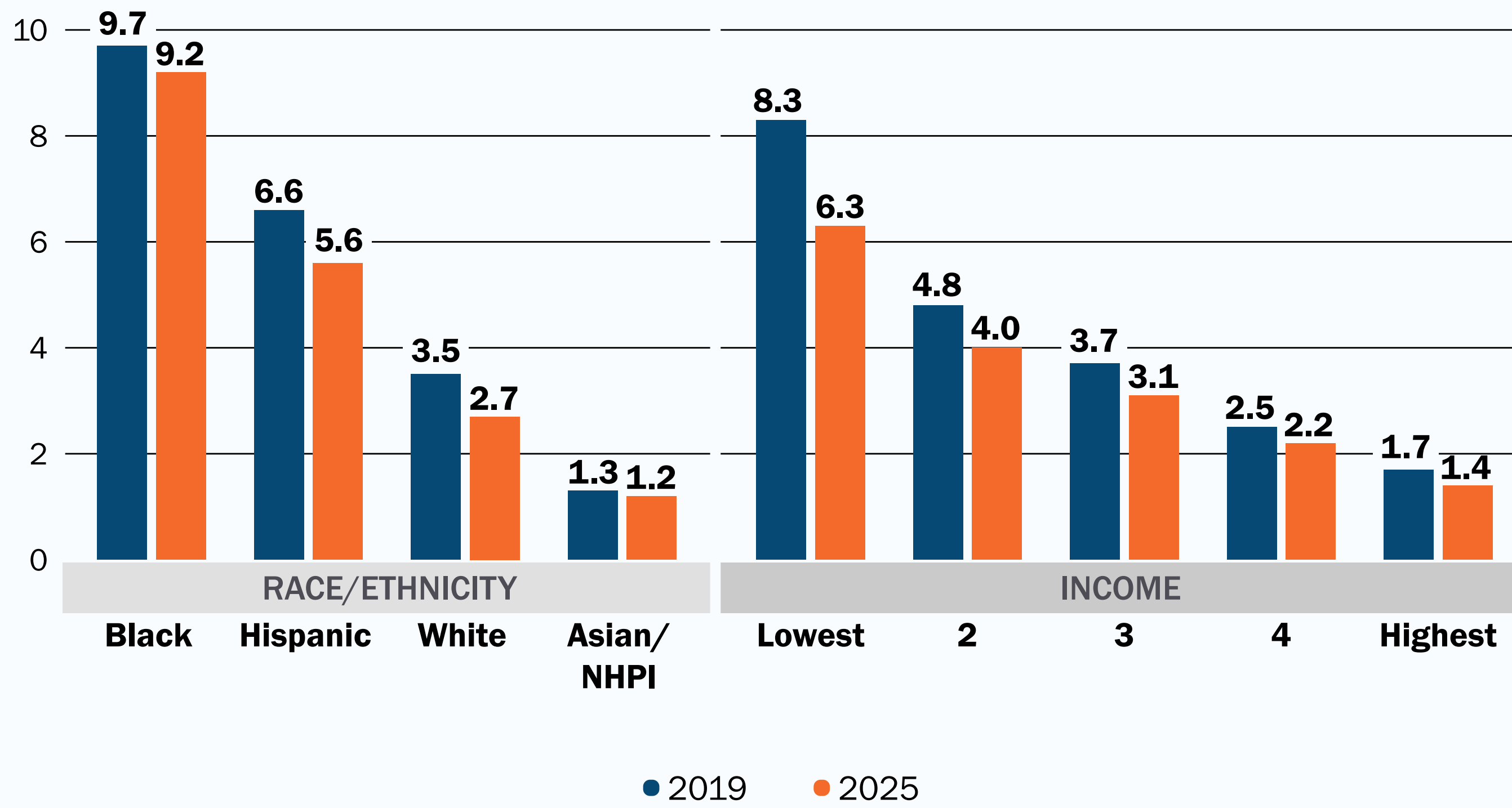
Rates of ED visits for NTDCs varied across the state in 2025, from 1.8 visits per 1,000 residents in the West Merrimack/Middlesex region to 7.2 visits per 1,000 in the Berkshires region (**Exhibit 3**).

EXHIBIT 1. Number of ED visits for non-traumatic dental conditions by type, 2016–2025



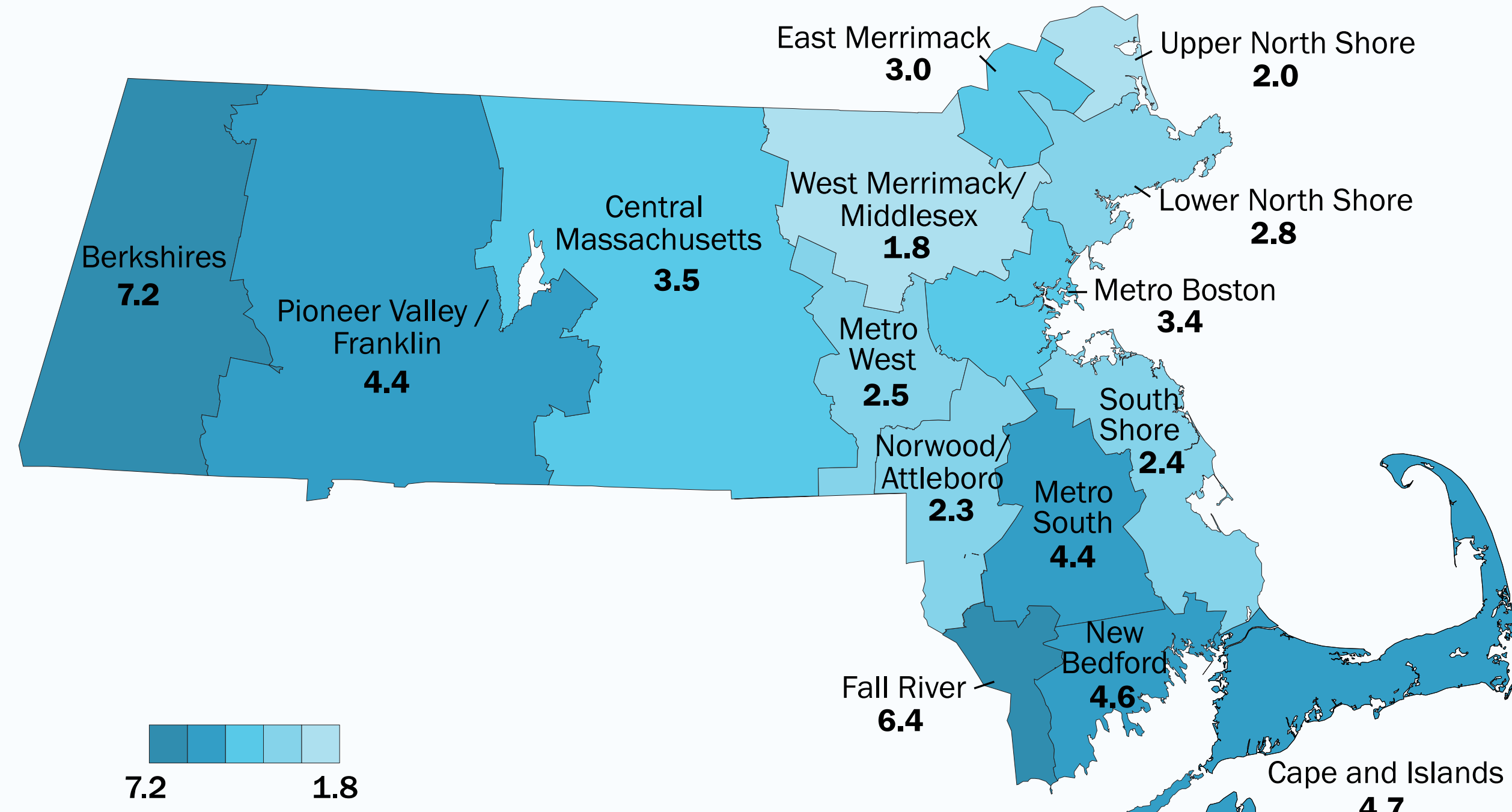
Notes: CPP = associated preventive procedures. CPP are routinely provided in a primary general dental clinic setting.
Source: HPC analysis of Center for Health Information and Analysis Emergency Department Database, 2016 - 2025

EXHIBIT 2. Number of ED visits for non-traumatic dental conditions per 1,000 population by race/ethnicity and income quintile, 2019 vs 2025



Notes: Race/ethnicity categories are mutually exclusive. NHPI = Native Hawaiian and Pacific Islander.
Source: HPC analysis of Center for Health Information and Analysis Emergency Department Database, 2019 and 2025

EXHIBIT 3. Number of ED visits for non-traumatic dental conditions per 1,000 population by HPC region, 2025



Sources: HPC analysis of Center for Health Information and Analysis Emergency Department Database, 2025. American Community Survey 5-year sample, 2024.

CONCLUSIONS

Although ED visits for NTDCs have decreased from pre-pandemic levels, rates have increased from 2020 to 2025, with the majority of visits being related to care that could have been provided in a general dental setting. This finding suggests persistent issues for individuals to access basic dental care. The increase in the share of non-CPP visits may not indicate lack of access to routine oral health care, but these conditions may be

best treated by a dental provider rather than in the ED.

Past HPC research has identified variation in ED visits for NTDCs by race and ethnicity, age, income, region, and payer type in 2017 and 2019.⁴ Variation by patient demographics persists in 2025, suggesting disparities in access to preventive care and treatment for dental conditions remain.

POLICY IMPLICATIONS

Avoiding routine dental care due to lack of coverage, access, or issues with affordability can have long-term health consequences. Policy solutions could include integrating oral health into primary care settings, developing an oral care protocol for hospitalized patients, utilizing ED referral programs that link patients in the ED to dental providers, integrating teledentistry, and expanding the oral health workforce to improve access.

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- Center for Health Information and Analysis, Findings from the 2023 Massachusetts Health Insurance Survey, June 2024.
- CPP = dental Carries, Periodontal disease, and associated Preventive procedures
- See the 2013 Annual Health Care Cost Trends Report Technical Appendix B3 Regions of Massachusetts for more information.
- Massachusetts Health Policy Commission. DataPoints Issue 20: Oral Health Access and Equity in the Commonwealth. Jul. 14, 2021.



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