

Dynamic duo

Integrated dental and medical benefits

Lower costs. Higher productivity. Healthier, happier employees.

Chronic disease is costing us

It's making us sick, and totaling billions.

Heart disease
costs to triple to
\$818 billion
by 2030¹

Diabetes
costs jumped 41% from 2007 to
\$245 billion
in 2012²

Preterm labor
costs
\$26.2 billion
each year³

Poor health costs **\$576 billion**,
\$227 billion from lost productivity.⁴

The antidote?



Integration.

Analyzing dental *and* medical claims data for a whole-health view.

Aetna Dental/Medical IntegrationSM program



Identify
at-risk members

2.5 million
at-risk members
identified⁵



Engage
automated outreach and education

60%
took advantage
of program⁵



Deliver
cost savings

\$11.9 million
in medical costs saved in
a single year⁶

Up to **20%** of employees can benefit from the enhanced care delivered through dental medical integration.⁷



The results are in, and they're amazing

Treating whole health, not individual parts, makes a healthy difference.

Healthy costs

5% ↓

lower medical
claims costs⁷

22% ↓

fewer hospital
admissions⁷

Healthy mouth

10% ↑

increased use of
preventive dental care⁷

42% ↓

lower use of major and
basic dental services⁷

Healthy pregnancy

18% ↓

lower preterm
labor rates⁸

26% ↓

fewer low-birth-
weight cases⁸

Healthy overall

45% ↑

improved diabetes
control⁹

27% ↓

lower risk scores over two
years of dental care¹⁰

¹Heidenreich, PA et al. Forecasting the Future of Cardiovascular Disease in the United States. A Policy Statement from the American Heart Association. 2011; 123: 933 – 944. Available at: circ.ahajournals.org/content/123/8/933.full.pdf. Accessed May 31, 2017.

²Economic Costs of Diabetes in the U.S. in 2012. American Diabetes Association. Available at: care.diabetesjournals.org/content/early/2013/03/05/dc12-2625.full.pdf+html. Accessed May 31, 2017.

³The impact of premature birth on society. March of Dimes. August 2015. Available at: marchofdimes.org/mission/the-economic-and-societal-costs.aspx. Accessed September 6, 2017.

⁴Using the IBI Full Cost Estimator (FCE), 9/2012. Available at: ibiweb.org/research-resources/detail/poor-health-costs-u.s.-economy-576-billion-infographic. Accessed May 31, 2017.

⁵Aetna Dental/Medical Integration program Book of Business report, as of December 2016.

⁶Internal analysis of total savings from heart disease and diabetes in 2015.

⁷Ongoing statistically valid analysis of Aetna Dental/Medical Integration program customers. Aetna Informatics, 2010 – 2017.

⁸Of the members in the Aetna Dental/Medical Integration program who received dental treatment while pregnant, including three months before and three months after pregnancy, only 6.8 percent had preterm delivery. For pregnant members in a comparable group with no preventive dental care, 8.3 percent had preterm delivery.

⁹Of the diabetic members in the Aetna Dental/Medical Integration program who started going to the dentist, only 17.8 percent are poorly controlled. For diabetic members in comparable group with no dental/medical integration program, 32.6 percent are poorly controlled. Similar results were seen for Total Cholesterol, LDL Cholesterol and Triglycerides.

¹⁰Albert DA, Sadowsky D, Papapanou P, Conicella ML, Ward A. An examination of periodontal treatment and per member per month (PMPM) medical costs in an insured population. BMC Health Services Research. 2006; 6: 103. Continued analysis of retrospective study proves sustained results, Aetna Health Analytics, August 2008.

Dental benefits and dental insurance plans are offered and/or underwritten by Aetna Health Inc., Aetna Dental Inc., Aetna Dental of California Inc. and/or Aetna Life Insurance Company (Aetna). Each insurer has sole financial responsibility for its own products.

This material is for information only and is not an offer or invitation to contract. An application must be completed to obtain coverage. Health and dental information programs provide general health and dental information and are not a substitute for diagnosis or treatment by a physician, dentist or other health or dental care professional. Dental providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to dental services. Dental benefits and dental insurance plans contain exclusions and limitations. Not all dental services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. The Aetna Dental/Medical IntegrationSM program, as well as dental plan features and availability, may vary by location and is subject to change. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to aetna.com.

Policy forms issued in Idaho and Oklahoma include: GR-9/GR-9N, GR-23 and/or GR-29/GR-29N.

aetna[®]

aetna.com