

**May 15, 2023**

The Honorable Xavier Becerra  
Secretary  
US Department of Health and Human Services  
200 Independence Avenue SW  
Washington, DC 20201

The Honorable Chiquita Brooks-LaSure  
Administrator  
Centers for Medicare & Medicaid Services  
US Department of Health and Human Services  
7500 Security Boulevard  
Baltimore, MD 21244

Submitted electronically to: <http://www.regulations.gov>

**Re: CMS–P–0015A**

Secretary Becerra and Administrator Brooks-LaSure:

CareQuest Institute for Oral Health is pleased to submit the following comments to the Centers for Medicare & Medicaid Services (CMS) on the collection of data through the Medicare Current Beneficiary Survey (MCBS; CMS–P–0015A).

## **I. Introduction**

CareQuest Institute for Oral Health is a nonprofit organization operating as a catalyst for systems change, bringing forth ideas and solutions to create a more accessible, equitable, and integrated health system for everyone. Using research in our advocacy work for health equity, as an organization we have long recognized the need to include reliable, valid, and high-quality assessment tools in measuring the oral health needs of vulnerable populations.

CareQuest Institute for Oral Health supports the addition of the **5-item Oral Health Impact Profile (OHIP-5)** to the Health Status and Functioning Questionnaire (HFQ) portion of the MCBS. As noted in the CMS proposal, the OHIP-5 is a widely-used oral health-related quality of life (OHRQoL) measure with good reliability and validity.<sup>1</sup> We provide additional information and data specific to the issue of OHRQoL on which CMS has solicited input in the comments that follow.

## **II. Oral Health-Related Quality of Life in Medicare Participants**

OHRQoL is critically important among older adults, as poor oral health and, by extension, poor OHRQoL is linked to conditions such as a cognitive decline,<sup>2</sup> physical frailty,<sup>3</sup> functional disability,<sup>4</sup> and increased mortality.<sup>3</sup> For example, periodontal disease is linked to an increased risk of Alzheimer's and other dementias.<sup>5</sup>

CareQuest Institute for Oral Health conducts the annual State of Oral Health Equity in America (SOHEA) survey. SOHEA is a nationally representative, probability-based survey of adult consumer attitudes, experiences, and behaviors on oral health. Data was collected by the National Opinion Research Center (NORC) in two rounds from January to February of 2021, 2022, and 2023. The survey

was conducted online and by telephone through NORC's AmeriSpeak® Panel. The sampling strata were based on age, race/Hispanic ethnicity, education, and gender.

The final sample size for the 2023 SOHEA survey is 5,240, including 1,592 individuals aged 60 and above (30.4% of the final sample). More than one in four survey respondents (25.3%) reported they receive their primary health insurance through Medicare. Over one in ten (11.3%) said that Medicare Advantage or Supplemental Plan covers their dental care.

The SOHEA sample contains a question modified from the OHIP to assess respondents' self-rated OHRQoL (*"Have you had difficulty doing your usual daily routines because of problems with your teeth, mouth, dentures, or jaws?"*). In 2023, 3.2% of adults aged 60 and above responded yes to this question. This percentage equates to **approximately 10.5 million individuals aged 60 or above who report impaired OHRQoL in 2023**. Further, more than a quarter (26%) of adults aged 60+ reported that their oral health was fair or poor, and a similar proportion (25.3%) of adults in this same age group had not seen a dentist in at least a year.

These findings from both the literature and the SOHEA survey highlight the importance of assessing OHRQoL in Medicare participants. In order to optimize the oral and overall health of the nation's older population, it is critical to regularly and systematically assess the OHRQoL of this growing segment of our population.

### III. Conclusion

CareQuest Institute for Oral Health appreciates the opportunity to provide comments about this proposed addition to the MCBS. If added, the OHIP-5 will allow robust and important monitoring of the oral health of our nation's older adults. For additional information, please contact me at [klaroch@carequest.org](mailto:klaroch@carequest.org).

Sincerely,

A handwritten signature in blue ink, appearing to read "Kristin LaRoche", enclosed in a light blue rounded rectangular border.

Kristin LaRoche

Vice President, Public Affairs

CareQuest Institute for Oral Health

## References

1. Amruta Naik, Mike T. John, Nidhi Kohli, Karl Self, and Priscilla Flynn. "Validation of the English-language version of 5-item Oral Health Impact Profile." *Journal of Prosthodontic Research* 60, no. 2 (2016): 85-91.
2. Kyung Hee Lee, Bei Wu, and Brenda L. Plassman. "Cognitive Function and Oral Health–Related Quality of Life in Older Adults." *Journal of the American Geriatrics Society* 61, no. 9 (2013): 1602-1607.
3. Tomoki Tanaka, Kyo Takahashi, Hirohiko Hirano, Takeshi Kikutani, Yutaka Watanabe, Yuki Ohara, Hiroyasu Furuya, Tsuji Tetsuo, Masahiro Akishita, and Katsuya Iijima. "Oral Frailty as a Risk Factor for Physical Frailty and Mortality in Community-Dwelling Elderly." *The Journals of Gerontology: Series A* 73, no. 12 (2018): 1661-1667.
4. Vittorio Dibello, Frank Lobbezoo, Madia Lozupone, Rodolfo Sardone, Andrea Ballini, Giuseppe Berardino, Anita Mollica et al. "Oral Frailty Indicators to Target Major Adverse Health-Related Outcomes in Older Age: A Systematic Review." *GeroScience* 45, no. 2 (2023): 663-706.
5. Miyuki Nagatani, Tomoki Tanaka, Bo-Kyung Son, Jun Kawamura, Junko Tagomori, Hirohiko Hirano, Maki Shirobe, and Katsuya Iijima, "Oral Frailty as a Risk Factor for Mild Cognitive Impairment in Community-Dwelling Older Adults: Kashiwa Study." *Experimental Gerontology* (2022): 112075.