

DENTAL MARKET TRENDS



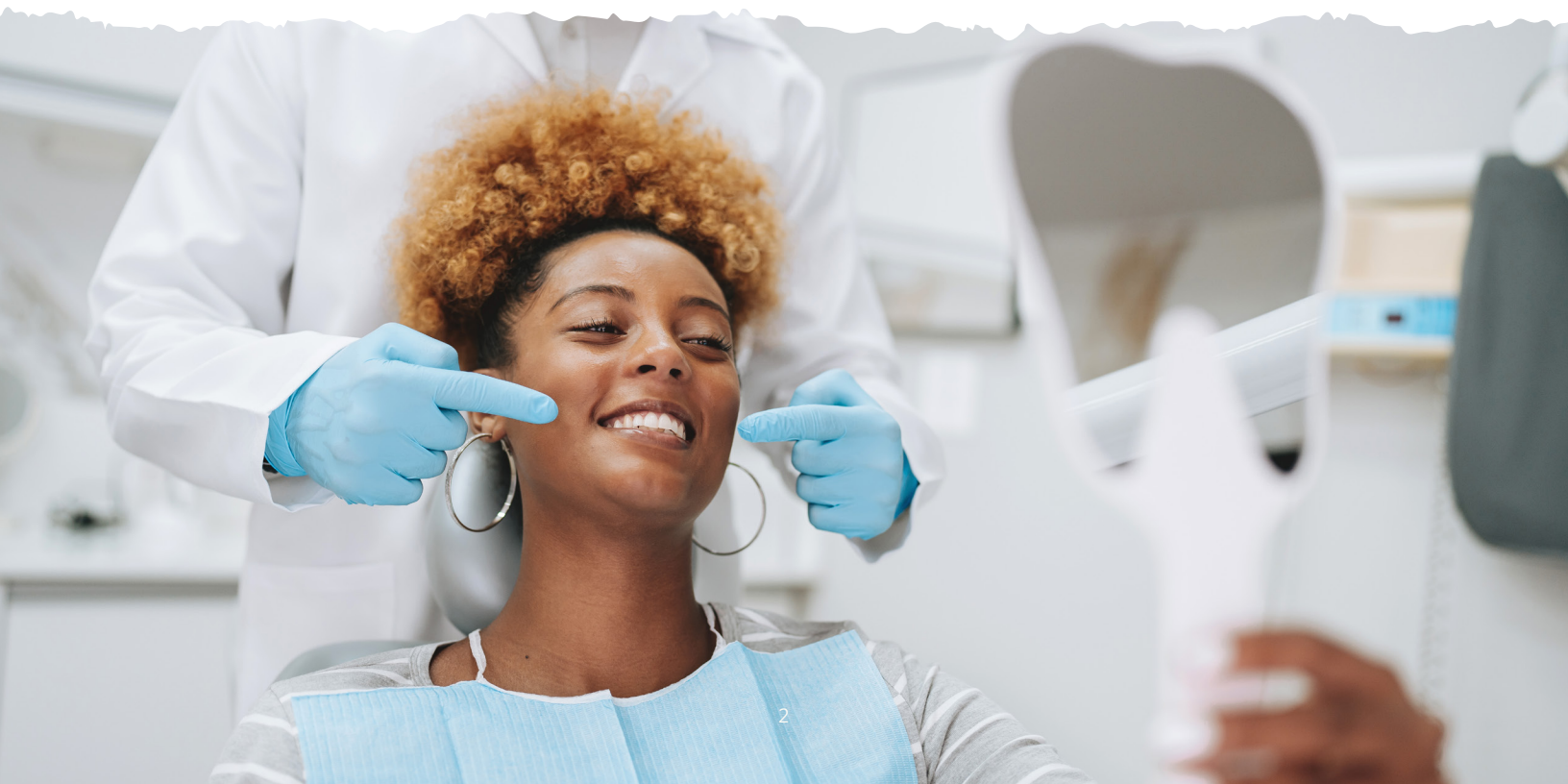
Why Access, Use and Network Strength Matter More Than Ever

Dental benefits continue to be among the most valued offerings in employer-sponsored benefit programs. High enrollment and consistent use reflect the important role oral health plays in overall well-being. At the same time, the dental market is evolving.

Rising provider costs, increased use and inflationary pressures are changing the economics of dental care. Dentists are facing higher operating expenses which contribute to higher fees for services. Meanwhile, more members are actively using their dental benefits, increasing overall claims activity. Together, these trends are placing added pressure on dental plans and long-term affordability.

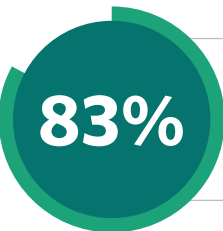
In this environment, dental networks are taking on greater importance. While networks have always supported access and convenience, they now play a larger role in helping to manage costs, support predictable pricing and protect employees from unexpected out-of-pocket expenses.

This report explores how current market trends are elevating the importance of dental network strength, what brokers and employers should consider when evaluating plans and how access to in-network care can influence cost, use and overall employee satisfaction.



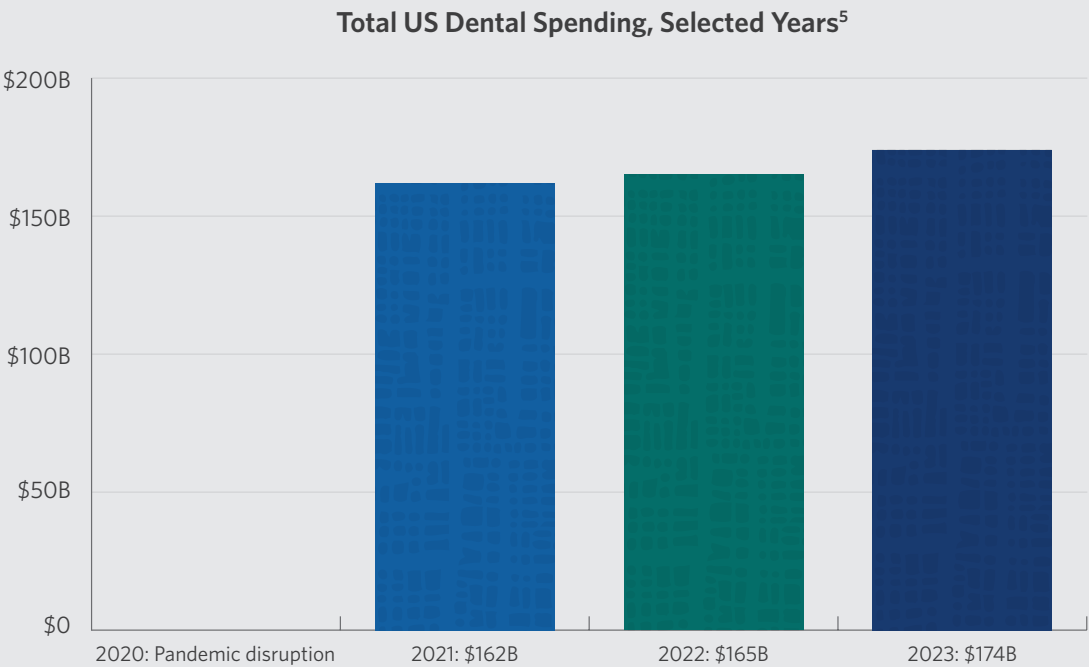
The Dental Market: Strong Demand, New Pressures

Dental coverage remains one of the most widely offered and valued employee benefits in the United States, with employer-sponsored plans continuing to play a central role in access to care. Enrollment remains high, reflecting the importance employees place on oral health as part of their overall well-being.



of the U.S. population have dental benefits, with the majority of coverage provided through employer-sponsored plans.¹

At the same time, the economics of dental care are changing. Total spending on dental services has increased in recent years, driven by a combination of higher provider costs and sustained demand for care. While use declined during the pandemic, more recent data show that dental care use has largely normalized — even as overall spending remains elevated compared to prepandemic levels.



US National Dental Expenditures Continue to Rise³

After the pandemic-related decline in 2020, U.S. dental spending rebounded sharply in 2021 and continued to increase through 2023. This multiyear upward trend reflects both increased use and rising provider costs.

Use trends add another layer of pressure. More members are actively using their dental benefits, particularly for routine services such as exams, cleanings and diagnostic care. As use increases, the volume of claims continues to grow, amplifying the impact of provider pricing and cost management strategies across dental plans.



Dental procedures per 1,000 enrollees increased by more than 7% in 2024 compared to 2023.²



Nearly three-quarters of all dental procedures are diagnostic or preventive services, reflecting frequent member interaction with dental benefits rather than infrequent, catastrophic events.²

Key factors influencing today's dental market include:



Higher dentist fees due to staffing challenges, supply costs and ongoing investments in technology



Greater use, particularly for diagnostic and preventive services



Higher claims volume, which underscores the financial impact of provider pricing and network discounts

Taken together, these trends are reshaping how dental plans are priced and evaluated, placing greater emphasis on affordability, access and predictability.

Dental Networks Have Always Mattered — but the Impact Has Changed

Dental networks have long been a foundational component of employer-sponsored dental benefits. Industry research consistently shows the vast majority of commercial dental enrollment is concentrated in **dental preferred provider organization (DPPO) plans**, which rely on networks of contracted dentists who agree to negotiated fee schedules. Data from the National Association of Dental Plans show DPPO plans represent **89% of commercial dental enrollment**,¹ emphasizing the central role networks have always played in dental coverage design.

THEN vs NOW

Historically, dental networks mattered, but their financial impact was more limited. In earlier market environments:

- Members typically used dental benefits less frequently, with greater focus on routine preventive care
- Dentist fee increases were more gradual and predictable
- The cost difference between in-network and out-of-network care was smaller
- Premiums tended to be more stable year over year

As a result, dental networks were often viewed as an access and convenience feature rather than a primary cost-management tool.

Today, the dynamic has shifted.

Higher use combined with higher provider fees mean that negotiated network discounts now apply across a greater volume of services. Even modest differences between in-network and out-of-network pricing can have a meaningful impact when multiplied across many routine claims. Where members receive care now plays a more significant role in overall plan cost and long-term affordability.



Why Dental Network Strength Matters More Today

Managing the Impact of Rising Provider Fees

In-network dentists agree to contracted fee schedules, which help limit the cost of covered services. As dentists' standard charges increase, the value of these negotiated fees becomes more significant. Strong networks can help moderate the impact of rising provider costs on both dental plans and members.

Increased Use Amplifies Cost Differences

As more members actively use their dental benefits, differences between in-network and out-of-network costs are multiplied across a higher number of claims. In-network care generally results in lower average claim costs, while frequent out-of-network use can drive higher claim costs.

Access Determines Whether Cost Controls Are Effective

Network savings depend on members' ability to access in-network care. When networks lack sufficient access in certain geographic areas or specialties, members may seek care out of network.

Out-of-network use can lead to:



Higher out-of-pocket costs for employees



Increased claim costs for carriers



Greater pricing pressure for employers at renewal

With fully insured dental plans, employers are not billed for individual claims. However, sustained higher claim costs, including out-of-network use, are reflected in future pricing. As a result, network access plays an important role in supporting long-term cost stability.

Why Dental Network Strength Matters to Brokers and Employers

Network reach and access are increasingly important considerations when choosing a dental plan.

Mutual of Omaha broker research indicates brokers frequently identify network size as a key factor when recommending dental plans to employer clients. A strong network helps brokers align plan recommendations with employer priorities around affordability, access and employee satisfaction.

For employers, robust dental networks can:

- ✓ Help employees access care at predictable costs
- ✓ Reduce the likelihood of unexpected out-of-pocket expenses
- ✓ Support a more consistent claims experience over time

In a more cost-conscious benefits environment, network strength has become a core component of overall plan value.



For brokers and employers, a large dental network often makes a dental carrier easy to work with.⁶



Brokers frequently name network size as a key consideration when recommending dental plans to employer clients.⁶

Stability and Growth Amid Market-Wide Pressure on Dental Sales and Subscriber Growth

Despite market declines, Mutual of Omaha’s dental business continues to grow with increased sales and subscribers.

Dental Market Declines in 2025	Mutual of Omaha’s Growth in 2025
<div><div>✗</div><div>-5.3% decline in dental subscribers⁴</div></div> <div><div>✗</div><div>-1.4% year-to-date decline in dental sales⁴</div></div>	<div><div>✓</div><div>65% increase in dental subscribers⁴</div></div> <div><div>✓</div><div>Rose from 11th to 7th in total dental subscribers between 2024-2025⁴</div></div> <div><div>✓</div><div>57% year-to-date increase in dental sales⁴</div></div>

This growth occurred during a period of market-wide pressure, reinforcing how thoughtful plan design, expanded access to care and continued investment in dental networks can support stability and growth even as broader market conditions shift.



Network Expansion as a Long-Term Approach

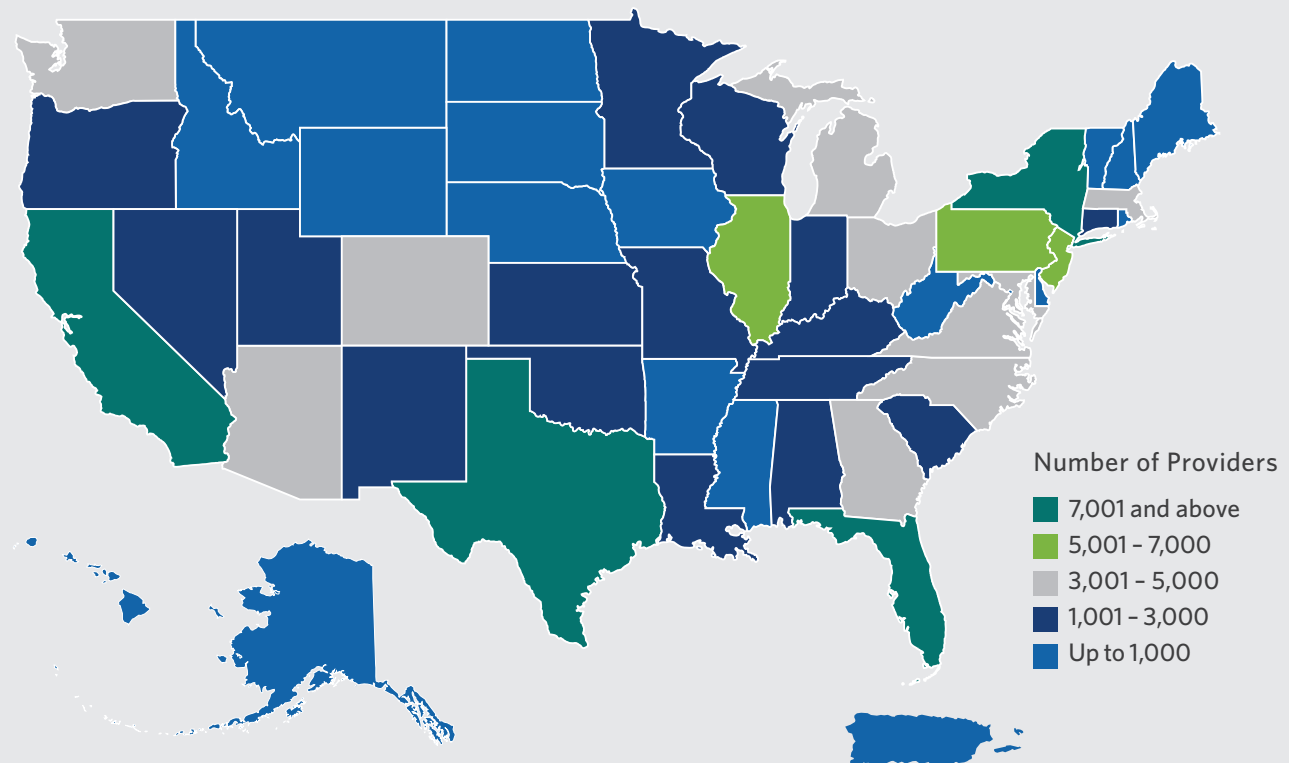
Mutual of Omaha significantly expanded its dental network in 2025, strengthening access and provider participation across key markets. Ongoing investment in the Mutually Preferred® Network helped ensure that members could access the dentists they wanted to see while benefiting from in-network savings.

Key features of Mutual of Omaha's dental network include:

- ✓ Access to more than **132,000 general and specialist providers nationwide**
- ✓ Participating dentists have agreed to **discounts averaging 20%–50% below usual office fees**
- ✓ Hassle-free provider choice, with no referrals, assignments or paperwork required
- ✓ Flexibility for each family member to choose their own dentist

By balancing access with cost management, continued network investment supports sustainable plan value for employers and employees.

Dental Coverage Map



Looking Ahead in Dental Benefits

The dental benefits landscape is changing. Strong demand for dental coverage, rising use and increasing provider costs are placing new pressures on affordability and plan performance.

In this evolving environment, dental network strength is no longer a convenience feature. Broad, accessible networks play a central role in managing costs, supporting predictable pricing and improving the overall employee experience.

For brokers and employers evaluating dental plans today, network access and reach should be key considerations. Dental plans that combine choice, convenience and cost management are better positioned to support long-term value in a changing market.

Sources

¹ National Association of Dental Plans (NADP). *Dental Benefits Report: Enrollment 2025*. Accessed January 2026.

² National Association of Dental Plans (NADP). *Dental Benefits Report: Utilization Trends. 2024 utilization analysis*. Accessed January 2026.

³ American Dental Association Health Policy Institute. *U.S. Dental Expenditures 2023*. Accessed January 2026.

⁴ LIMRA. *Q3 2025 Workplace Benefits Dental and Vision Report*. Accessed January 2026.

⁵ American Dental Association Health Policy Institute (HPI), analysis of CMS and BEA data. Accessed January 2026.

⁶ Mutual of Omaha Employer and Broker Advisory Board Dental Report (May, 2024). Accessed January 2026.



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