

The State of Children's Dental Health: Making Coverage Matter

Rhode Island

B

2011 GRADE

Rhode Island meets five of the eight policy benchmarks aimed at addressing children's dental health needs. The state dropped one letter grade after examination of its rules governing dental hygienists' ability to place sealants on students' teeth in school-based programs. Although the relevant statute has not changed since last year, policy makers recently clarified that a dentist's screening is necessary before a hygienist can place a sealant.

Rhode Island offers fluoridated water to almost 85 percent of its residents and has provided dental services to almost 47 percent of Medicaid-enrolled children.

HOW WELL IS RHODE ISLAND RESPONDING?

2011: **B**

2010: **A**

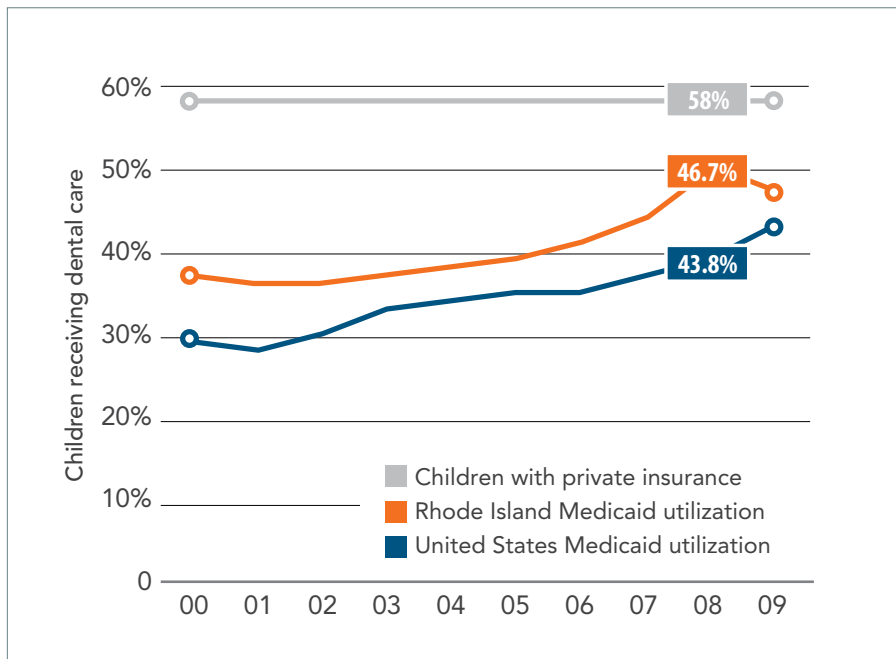
DATA YEAR	MEASURED AGAINST THE NATIONAL BENCHMARK FOR EIGHT POLICY APPROACHES	STATE	NATIONAL	MEETS OR EXCEEDS	MET OR EXCEEDED
2010	Share of high-risk schools with sealant programs	50-74%	25%	✓	✓
2010	Hygienists can place sealants without dentist's prior exam	NO	YES		✓
2008	Share of residents on fluoridated community water supplies	84.6%	75%	✓	✓
2009	Share of Medicaid-enrolled children getting dental care	46.7%	38.1%	✓	✓
2010	Share of dentists' median retail fees reimbursed by Medicaid	35.4% ²	60.5%		
2010	Pays medical providers for early preventive dental health care	YES	YES	✓	✓
2010	Authorizes new primary care dental providers	NO	YES		
2010	Tracks data on children's dental health	YES	YES	✓	✓
Total score				5 of 8	6 of 8

Grading: A = 6-8 points B = 5 points C = 4 points D = 3 points F = 0-2 points

The state's RItE Smiles managed-care program may play a role in the relatively high levels of access for low-income Rhode Island kids. A 2010 report evaluated the program's impact and showed that over a recent six-year span, the percentage of Medicaid-enrolled children under age seven who received a preventive dental visit—an oral exam, for example—rose by 26 percent.¹

HOW BAD IS THE PROBLEM?

Too many children lack access to dental care, with severe outcomes. One measure of the problem: more than half of the children on Medicaid received no dental service in 2009.



SOURCE: Centers for Medicare and Medicaid Services, CMS-416.

SOURCES FOR BENCHMARKS: (1, 2, 7) Pew Center on the States survey of states; (3) Centers for Disease Control and Prevention; (4) Centers for Medicare and Medicaid Services, CMS-416; (5, 6) Medicaid/SCHIP Dental Association and American Academy of Pediatrics; (8) National Oral Health Surveillance System.

1. "Rite Smiles Evaluation Report: Trends from 2002-2008," Rhode Island Department of Human Services, May 17, 2010, http://www.dhs.ri.gov/Portals/0/Uploads/Documents/Public/Reports/ritesmiles_trends_2002_2008.pdf (accessed April 14, 2011).

2. Weighted average of fee-for-service and managed care payment rates.