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



Washington meets five of the eight policy benchmarks aimed at addressing children's dental health. Despite severe dental workforce shortages—35 of the state's 39 counties do not have enough dentists—the state reduced adult dental services in 2010, further reducing residents' ability to get regular dental care.¹ This cut could have a negative impact on children, as research indicates that parents who visit dentists are more likely to secure dental care for their kids.²

In 2010, Washington advocates, with the support of the W.K. Kellogg Foundation, began an effort to expand access to care by licensing dental therapists.³

HOW WELL IS WASHINGTON RESPONDING?				2011: B	2010: B
DATA YEAR	MEASURED AGAINST THE NATIONAL BENCHMARKS FOR EIGHT POLICY APPROACHES	STATE	NATIONAL	MEETS OR EXCEEDS	MET OR EXCEEDED
2010	Share of high-risk schools with sealant programs	25-49%	25%	\checkmark	
2010	Hygienists can place sealants without dentist's prior exam	YES	YES		
2008	Share of residents on fluoridated community water supplies	62.4%	75%		
2009	Share of Medicaid-enrolled children getting dental care	52.4%	38.1%	\checkmark	
2010	Share of dentists' median retail fees reimbursed by Medicaid	46.5%	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	5 of 8

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

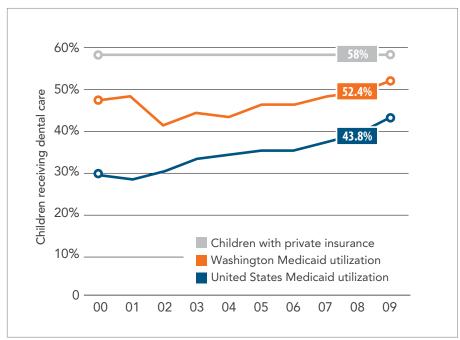


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Washington was one of eleven states to bring dental services to most of its Medicaid-enrolled children in 2009. However, dental care was out of reach for many Washington residents.

HOW BAD IS THE PROBLEM?

Too many children lack access to dental care. While more than half of Washington children on Medicaid received care in 2009, they were less likely to be treated than kids with private insurance.



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

SOURCES FOR NATIONAL BENCHMARKS: 1) Association of State and Territorial Dental Directors; 2) American Dental Hygienists' Association; 3) Centers for Medicare and Medicaid Services, CMS-416; 4) American Dental Association; 5) Pew Center on the States, National Academy for State Health Policy and American Academy of Pediatrics; 6) National Oral Health Surveillance System.

1. V. Smith, et. al., "Hoping for Economic Recovery, Preparing for Health Reform: A Look at Medicaid Spending, Coverage and Policy Trends Results from a 50-State Medicaid Budget Survey for State Fiscal Years 2010 and 2011," Kaiser Commission on Medicaid and the Uninsured, September 2010; http://www.kff.org/medicaid/upload/8105.pdf (accessed October 20, 2010).

2. "Children More Likely to Visit the Dentist If Their Parents Do, Too," ScienceDaily, (February 16. 2010). http://www.sciencedaily. com/releases/2010/02/100201091634.htm, (accessed April 2011).

3. K. Reincke and D. Jordan, "W.K. Kellogg Foundation supports community-led efforts in five states to increase oral health care access by adding dental therapists to the new team," W.K. Kellogg Foundation, November 17, 2010.

For more information, please visit www.pewcenteronthestates.org/makingcoveragematter.