

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

B

2011 GRADE

Oregon meets five of the eight policy benchmarks aimed at addressing children's dental health needs, one more than it met in Pew's 2010 report. The state improved by achieving the threshold for the percentage of Medicaid-enrolled children receiving dental care. However, Oregon is one of only nine states that do not provide fluoridated water to at least half of their citizens.

The state reduced adult dental benefits in 2010.¹ This change could have a negative impact on children, as research indicates that parents who visit dentists are more likely to arrange care for their kids.² On a positive note, Oregon is one of only a handful to have sealant programs in more than half of its high-risk schools. Legislation was proposed in the 2011 session to create an advanced dental hygiene practitioner, whose duties would include filling cavities.³

HOW WELL IS OREGON RESPONDING?

2011: **B**

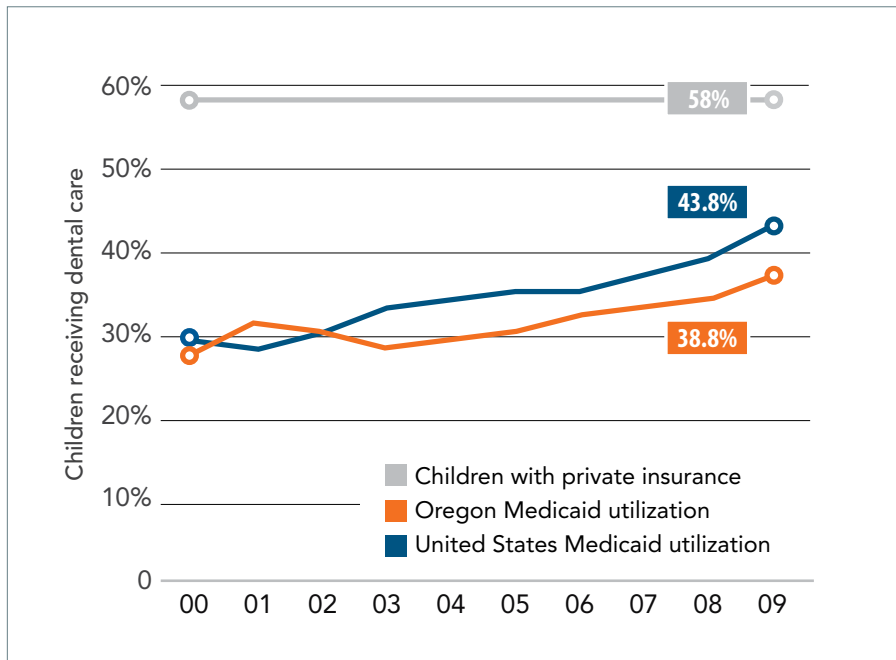
2010: **C**

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	50-74%	25%	✓	✓
2010	Hygienists can place sealants without dentist's prior exam	YES	YES	✓	✓
2008	Share of residents on fluoridated community water supplies	27.4%	75%		
2009	Share of Medicaid-enrolled children getting dental care	38.8%	38.1%	✓	
2010	Share of dentists' median retail fees reimbursed by Medicaid	43.3%	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	4 of 8

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

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. 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. Oregon Senate Bill 227, <http://www.leg.state.or.us/11reg/measpdf/sb0200.dir/sb0227.intro.pdf> (accessed February 24, 2011).