



Check-Up on Oral Health

A Call to Action

2014





WHO WE ARE

Michigan Oral Health Coalition is a 501c3 non-profit organization whose mission is to improve oral health in Michigan by focusing on prevention, health promotion, oral health data, access and the link between oral health and overall health. With members throughout the state, the Coalition is comprised of primary care clinicians, oral health clinicians, dental benefit providers, advocacy and provider organizations, state and local government officials, and consumers working together to improve oral health in Michigan.

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BACKGROUND

Oral health plays a significant role in general health and well-being throughout the lifespan. Yet, "a silent epidemic" of oral disease is affecting our most vulnerable citizens—children, the elderly, people with special needs, and adults who lack access to affordable dental care. Dental disease has been associated with such chronic diseases as diabetes, stroke and heart disease. Further, recent reports correlate increased risk for poor birth and pregnancy outcomes such as preterm, low birth weight and gestational diabetes to dental disease.

Strides have been made in Michigan to improve access to oral health preventive measures such as community water fluoridation, fluoride varnish for ages 0 to 5, and school-based dental sealant programs. The gains made in increasing access through the expansion of Healthy Kids Dental and the maintenance of Medicaid adult dental are offset by Michigan's slowly improving economic times. The Michigan Oral Health Coalition's seeks to be the collective voice on oral health issues. For more information please contact us at 517.827.0466.



EXPAND HEALTHY KIDS DENTAL STATEWIDE

MICHIGAN ORAL HEALTH COALITION

2014 Issue Brief

MEDICAID ADULT DENTAL

BACKGROUND

Oral health is essential to overall health and quality of life. Left untreated, dental diseases can result in infection and severe pain, an inability to perform daily activities, and in very rare cases, death. In 2011, more than 1,000 Michigan residents were hospitalized due to emergency conditions related to the teeth and jaw—all of these considered avoidable hospitalizations. Visiting an emergency department or hospital for dental conditions often points to inadequate access to care. So why are so many Michigan residents still seeking care through the emergency room? The answer—no access to an oral health care provider.

Access to oral health care providers is affected by both the geographic distribution of dentists and the number of dentists in a given area who will see patients who are uninsured or covered by Medicaid. Sixty of Michigan's 83 counties have either a partial or full-county geographic or population group dental healthcare provider shortage area designation.

Six counties in Michigan do not have a single dentist who is enrolled in Medicaid. Only 10 percent can be considered critical access providers that are having Medicaid claims totaling \$10,000 or more in 2008. One of the primary reasons that dentists give for not accepting Medicaid is its very low reimbursement rate coupled with a high administrative burden. Medicaid dental reimbursements rates have not increased since the early 1990s.

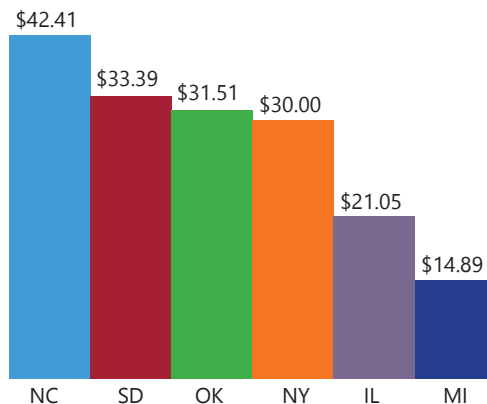
Currently, Medicaid is the primary insurer of dental care for more than 900,000 low-income, vulnerable Michigan adults.

AN INVESTMENT IN MICHIGAN'S VULNERABLE ADULTS

- For every dollar Michigan invests in its Medicaid program, the state receives an additional \$2 from the federal program.
- Employed adults lose more than 164 million work hours nationally (80,000 FTEs) each year due to dental disease, its associated pain or dental visits.
- Evidence suggests that some employers are less likely to hire individuals whose appearance is affected by dental disease or disorders.
- Medicare does not include any oral health benefits.



**Adult Comprehensive Oral Exam (D0150)
Medicaid Reimbursement Rate, 2014**



MICHIGAN ORAL HEALTH COALITION

2014 Issue Brief

PREVENTION

BACKGROUND

Many Americans now enjoy markedly better oral health than did their parents. However, certain segments of the population still have severe dental decay, much of which remains untreated.

Healthy People 2020 objectives seek to eliminate these disparities, so that all Americans receive the benefits of good oral health. Community-based programs such as community water fluoridation and school-based dental sealant programs are particularly effective and cost-saving

AN INVESTMENT IN ALL MICHIGANDERS

Every dollar spent for community water fluoridation saves from \$8 to \$49 in treatment costs depending on the size of the community. Savings are greatest in large communities.

- Fluoridated water saves more than \$4.6 billion annually in dental costs in the United States.
- School-based dental sealant programs are cost saving when delivered to populations at high-risk for tooth decay, such as children in low-income households.

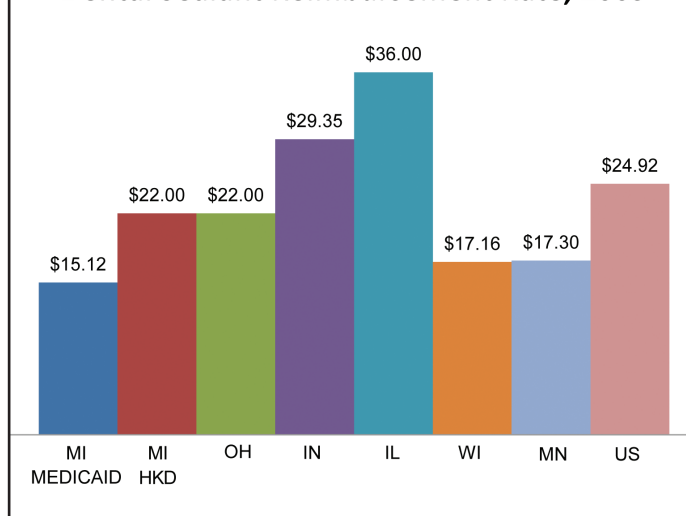
COMMUNITY WATER FLUORIDATION

- CDC recognizes community water fluoridation as 1 of 10 great public health achievements of the 20th century.
- Community water fluoridation still prevents tooth decay even though people now also get fluoride from other sources such as toothpaste, rinses, and other topical applications at the dental office.
- At present, more than 7 million people statewide are receiving the benefits of community water fluoridation.

SEALANTS

- Only 23.3% of 3rd grade children in Michigan had sealants present on first molar teeth, far below the *Healthy People 2010* goal of 50%.
- School-based sealant programs provide sealants to children unlikely to receive them otherwise. Children of racial and ethnic minority groups have twice as much untreated decay in their permanent teeth, but only receive about half as many dental sealants.
- Michigan has 58% of children with caries experience in their primary or permanent teeth, age 6-8, while the U.S. has 52%.

Dental Sealant Reimbursement Rate, 2009





7215 Westshire Drive
Lansing, MI 48917
517.827.0466

www.mohc.org