

The State Oral Health Plan Development Process

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Priorities

- **Oral disease burden document**
- **State Oral Health Plan development**
- **Oral Health Surveillance System**
- **Development of a partnership**

**Surveillance &
Epidemiology**

**Population-
based
Programs**

State Oral Health Program
Achieving targets

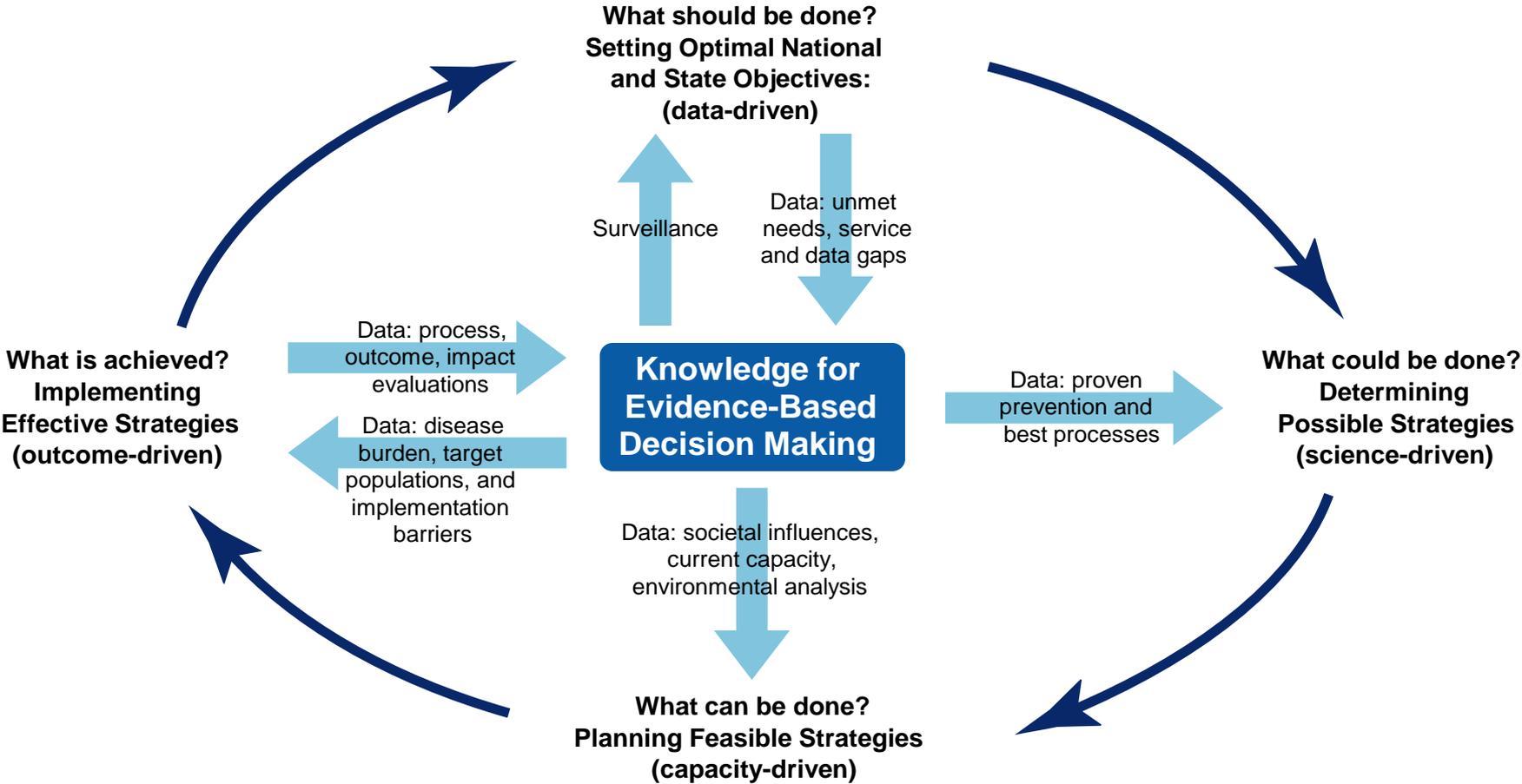
**Health
Systems
Interventions**

**Community-
Clinical
Linkages**

Infrastructure and Capacity



Framework for Comprehensive State Oral Health Plans



Source: CDC

Achieving the Vision of Healthy People in Healthy Communities

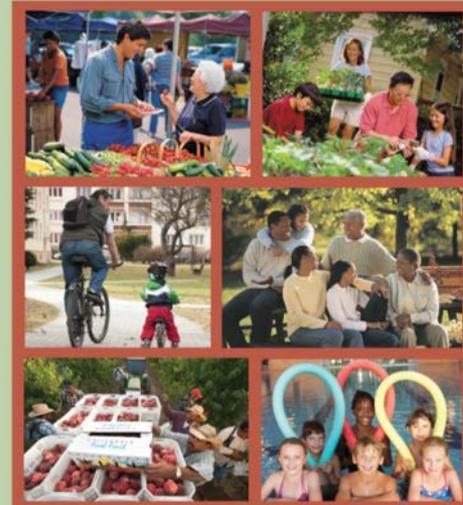
Making California the Healthiest State

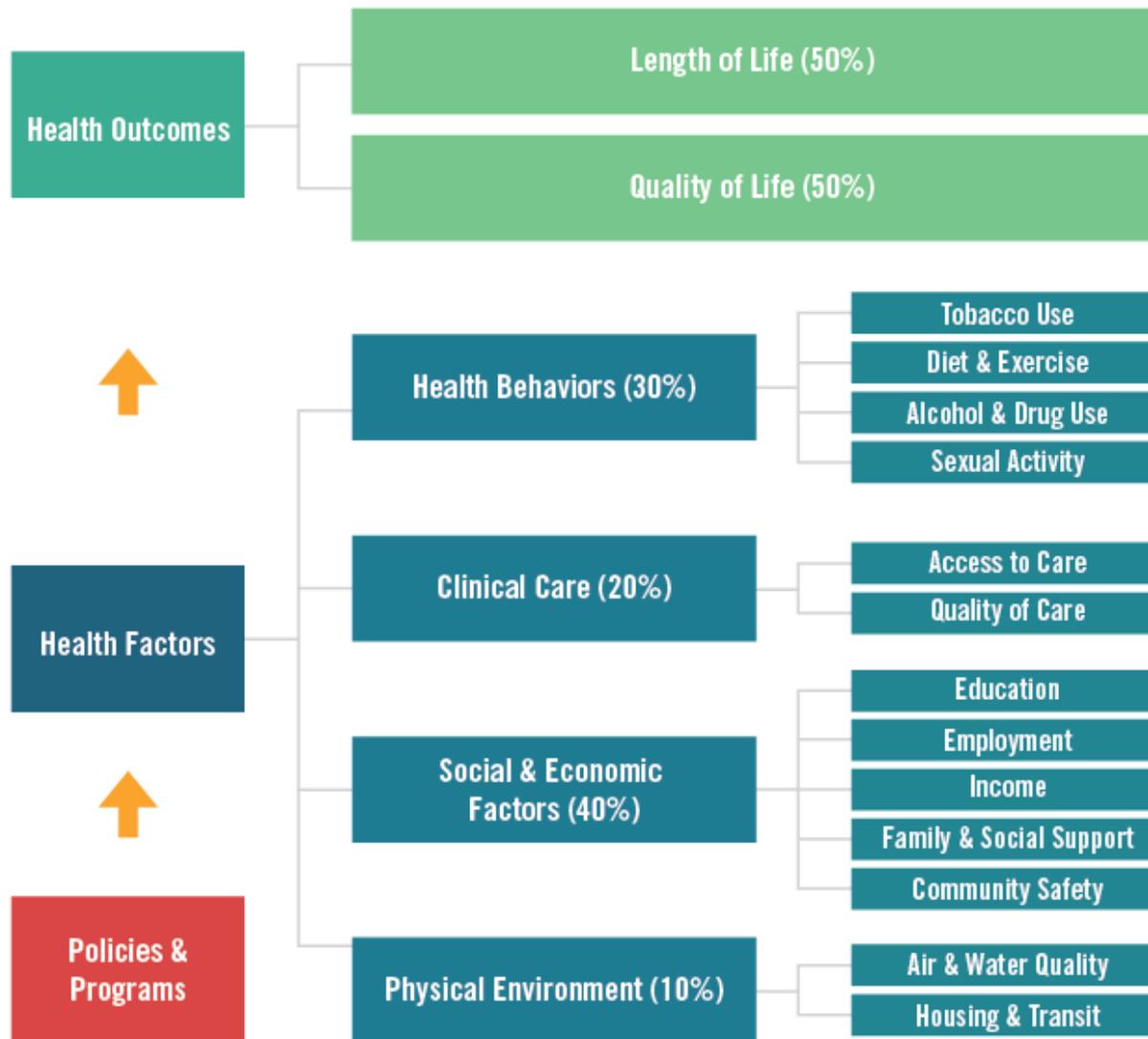
Let's Get Healthy California Task Force Final Report

December 19, 2012



California Department of Public Health California Wellness Plan 2014



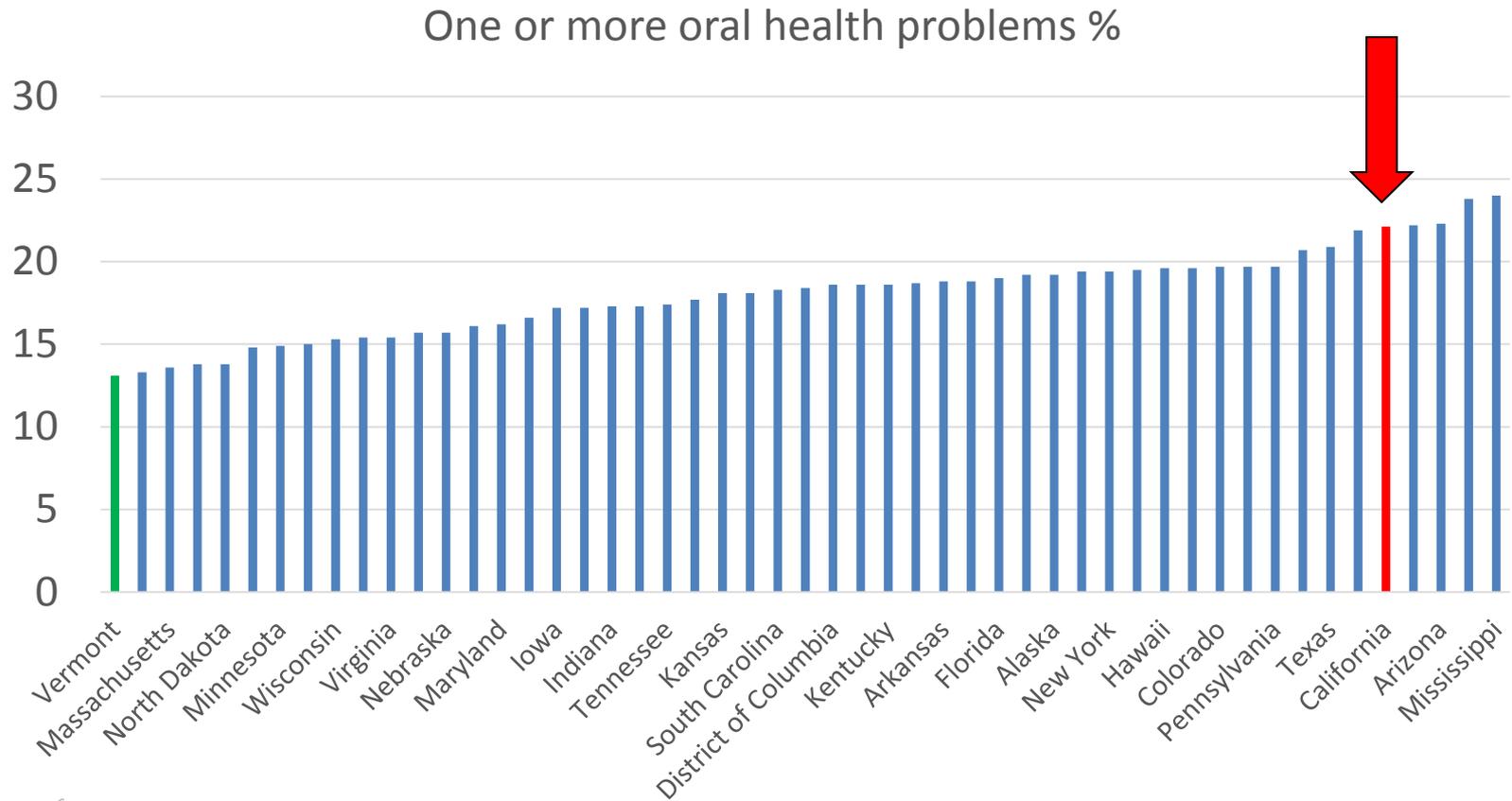




Issues, Challenges and Opportunities

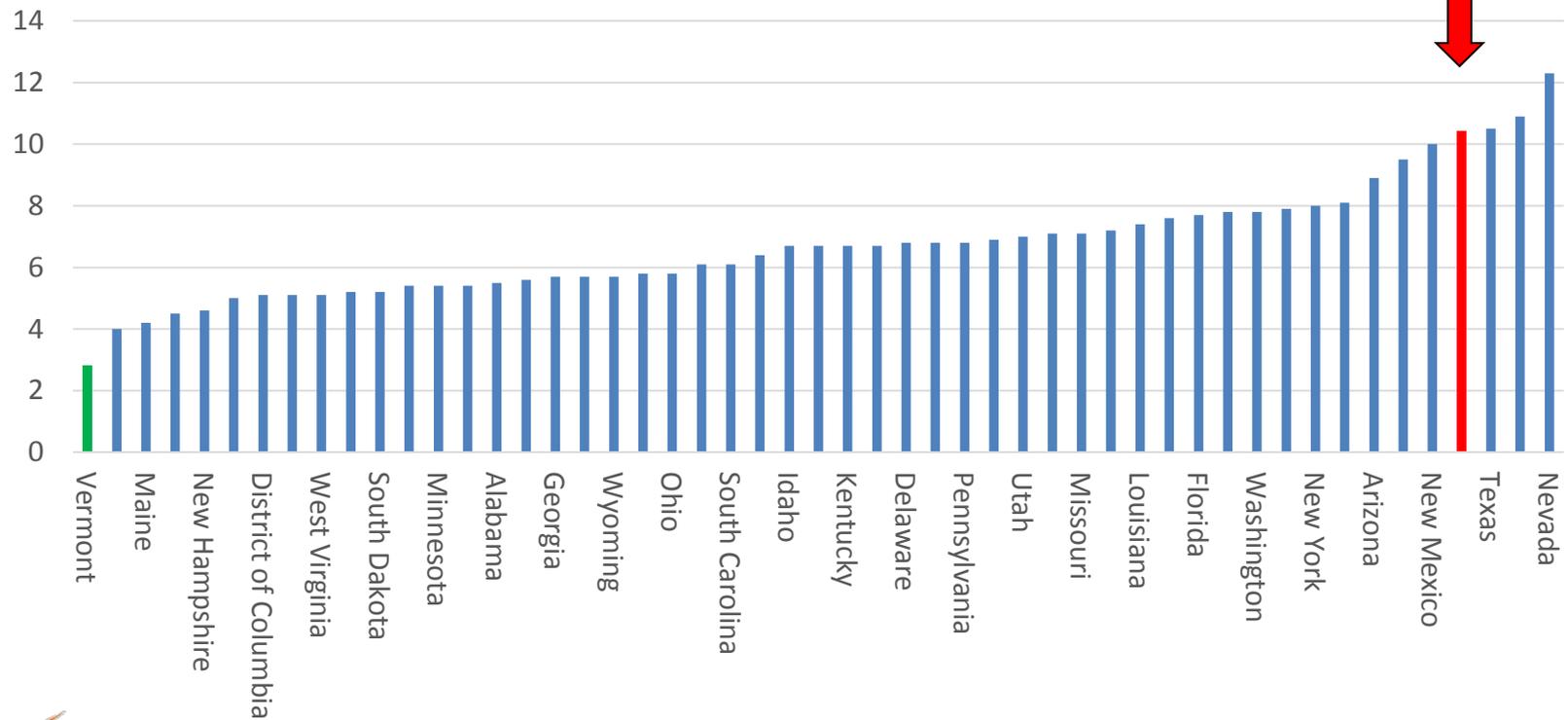
How many children had oral health problems in the past 12 months?

2011/12 National Survey of Children's Health

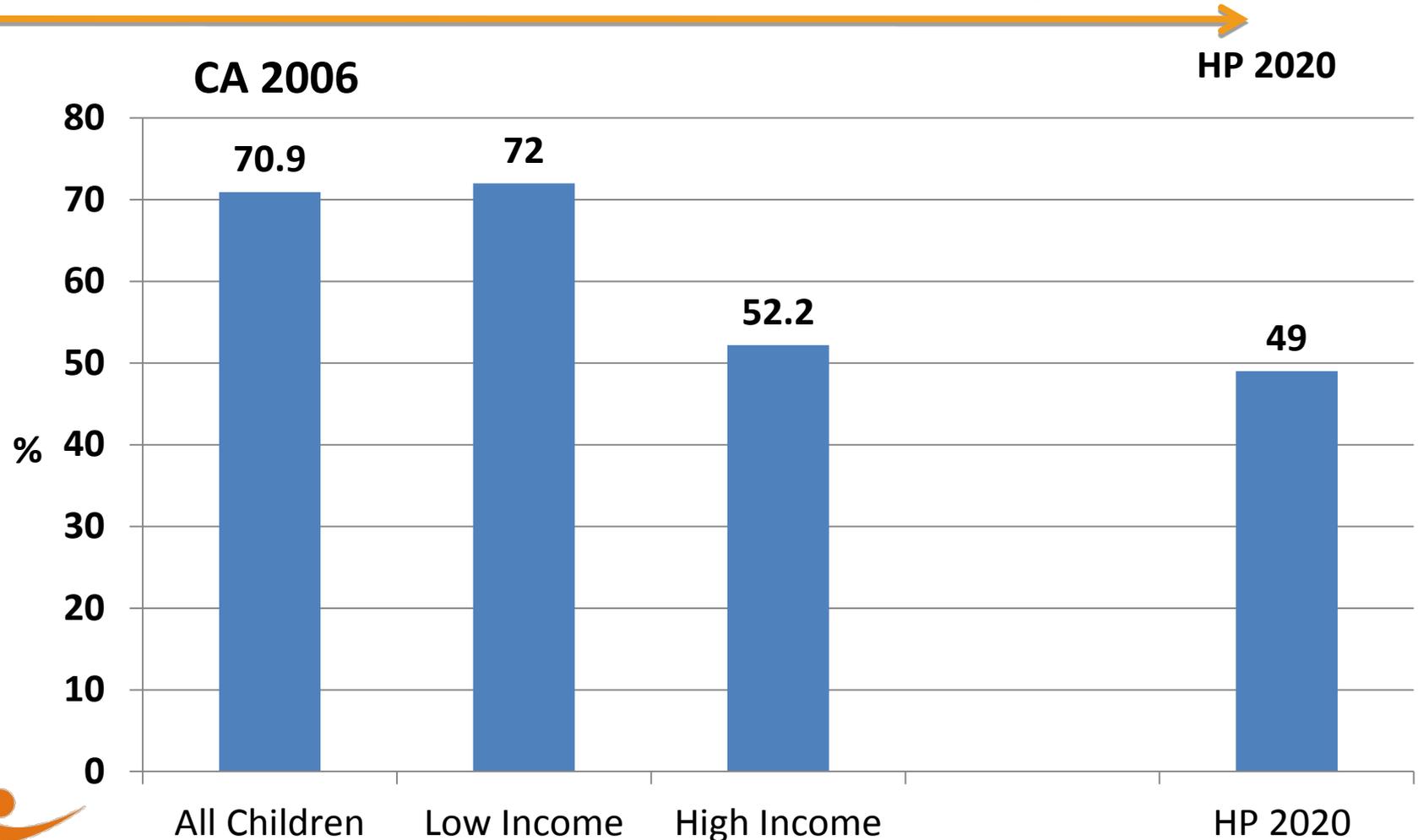


2011/12 National Survey of Children's Health: In general, how would you describe your child's condition of teeth?

Fair/poor condition %

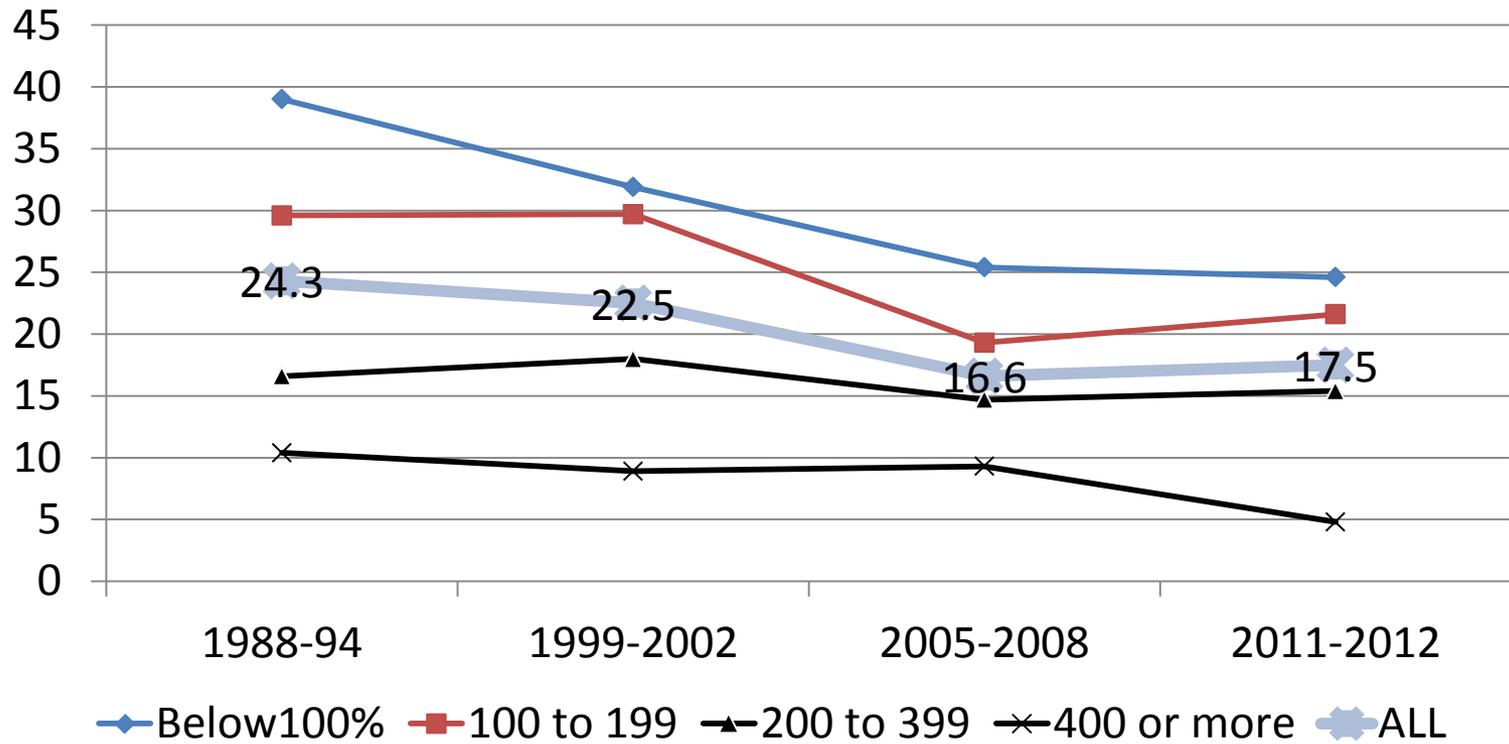


Prevalence of Tooth Decay, 3rd Grade Children and HP 2020 Objective

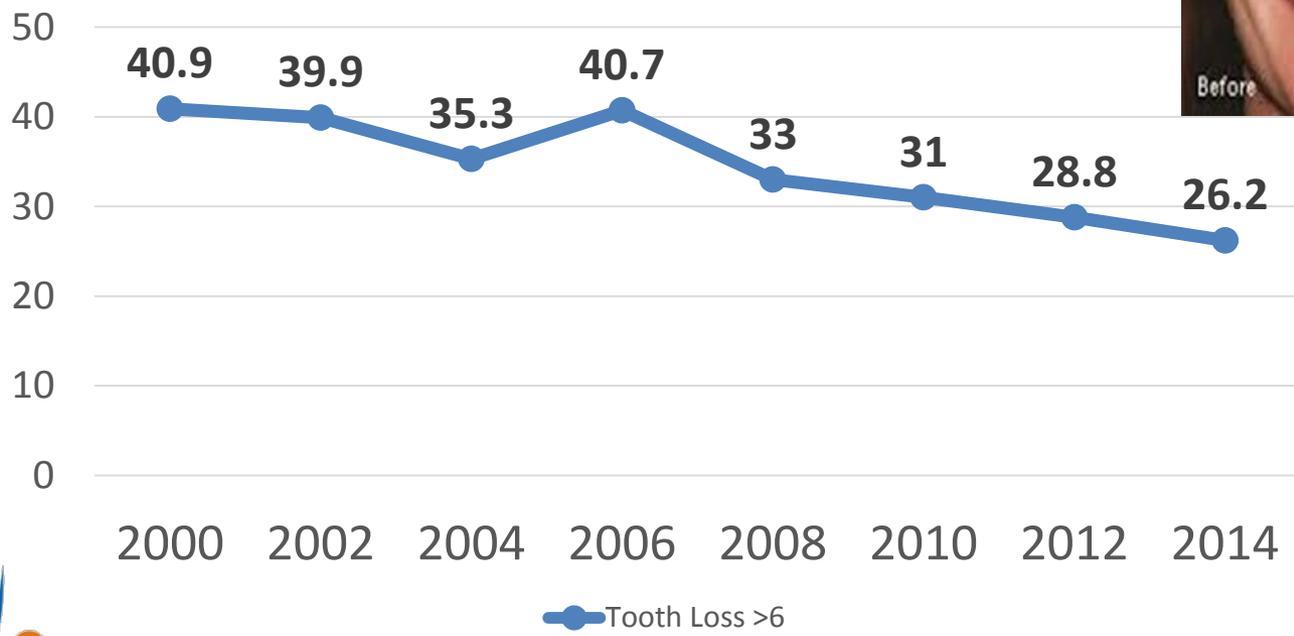


Tooth Decay

Percent of persons with **untreated dental caries** (Age 5-19 years). NHANES 1988 to 2012.



Trends in Tooth Loss (>6 teeth) among Older Adults (65+ years). California BRFSS, 2000-2014.



Oral and Pharyngeal Cancers in California

- Incidence ~ 4000 cases
- Mortality ~ 950 deaths
- Earliest stage diagnosis
 - Male 16.9%
 - Female 27.4%
- 5 Year Relative Survival Rate
 - 65.9%

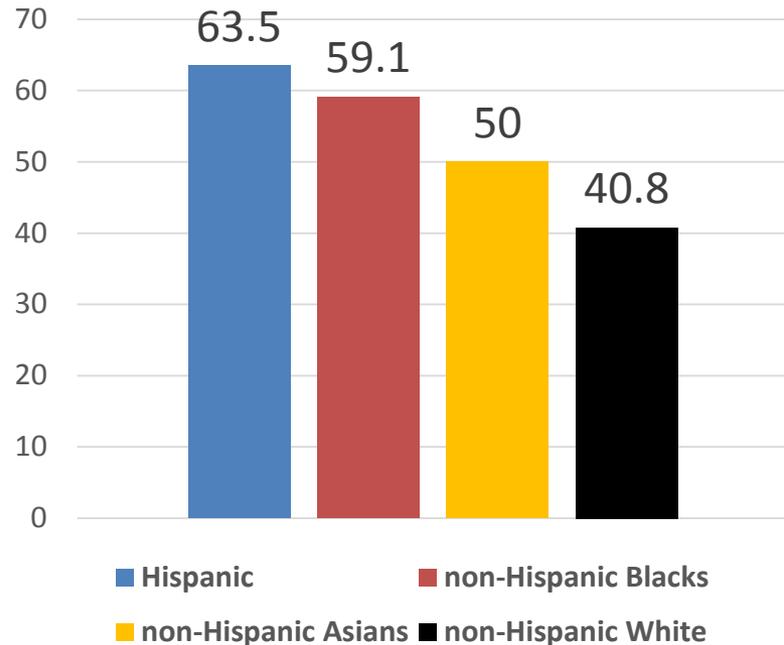


Prevalence of Periodontitis in Adults (age >30 years). NHANES 2009-2012.

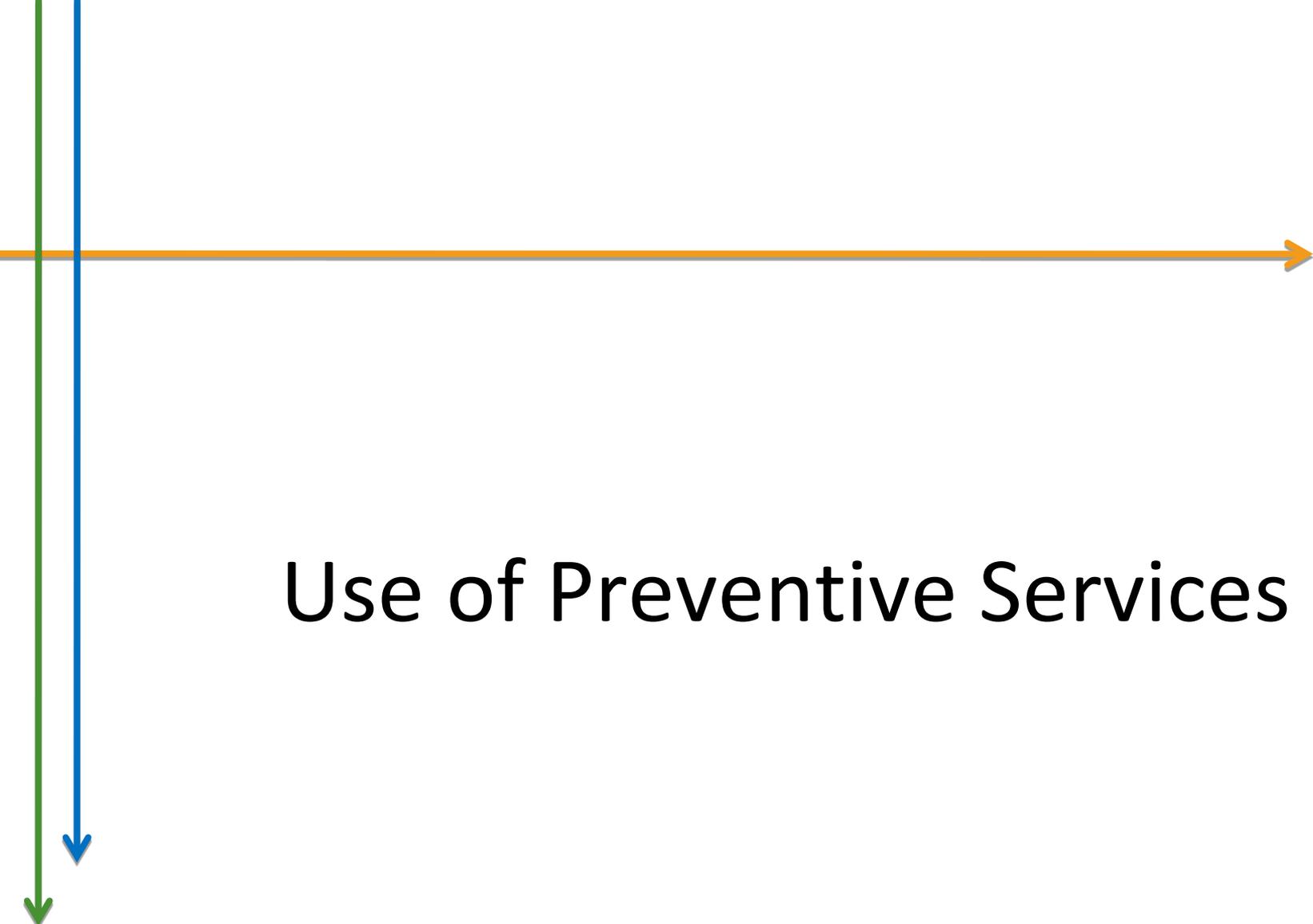
2 cm foot ulcer- smaller than the ulcerated epithelium
within infected periodontal pockets



Periodontitis According to Race and Ethnicity



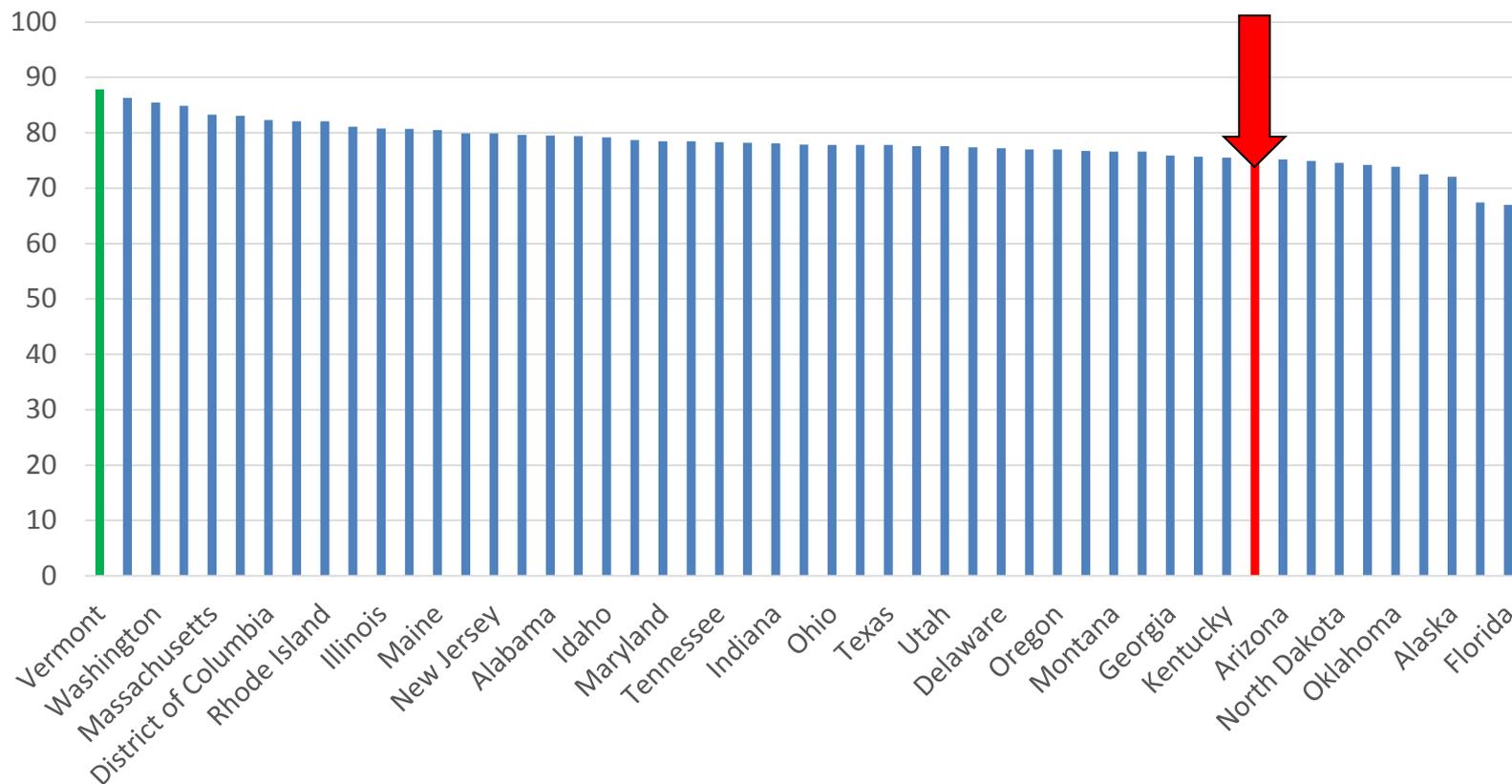
Eke PI, Dye BA, Wei L et al. Journal of Periodontology 2015;86(5):611-622.



Use of Preventive Services

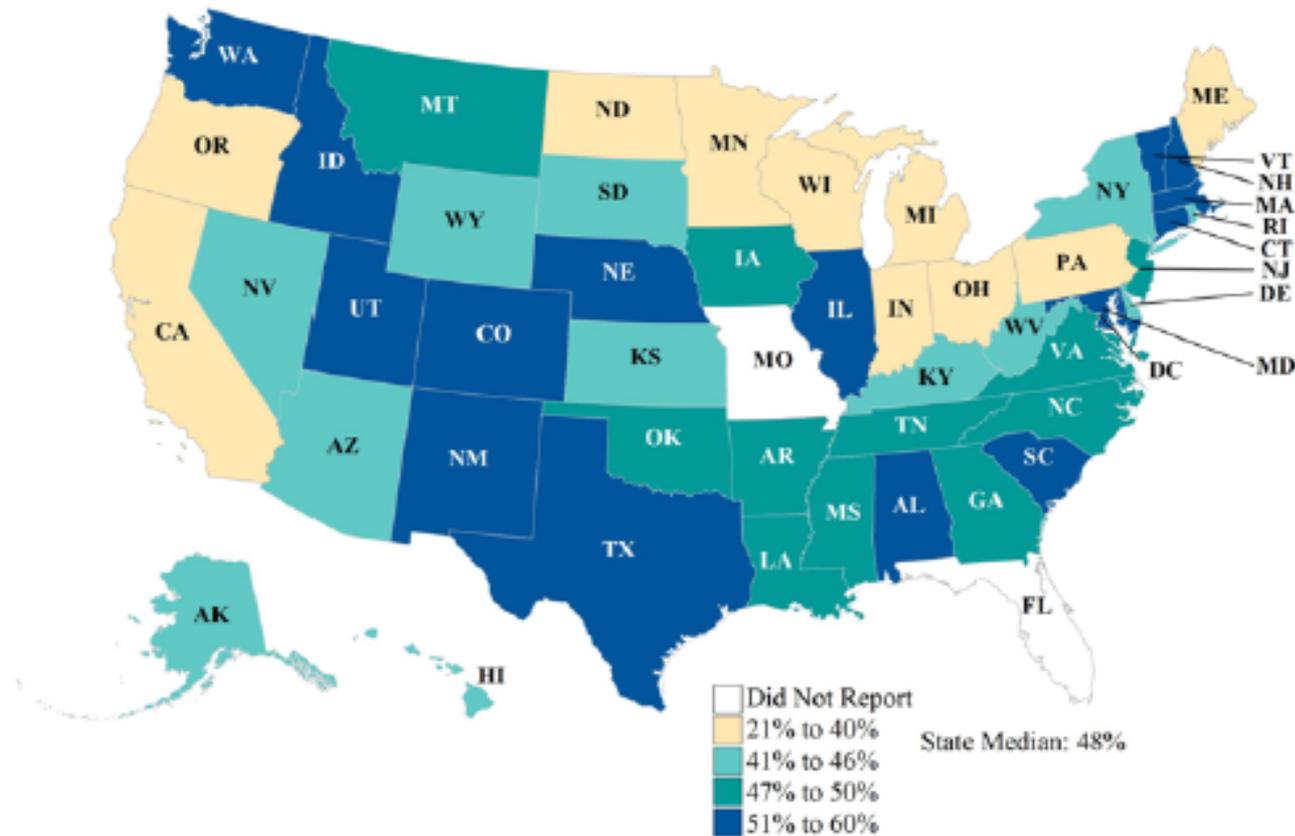
During the past 12 months/since [his/her] birth, how many times did [child name] see a dentist for preventive dental care such as check-ups and dental cleanings?

One or more preventive dental care visits %



Medicaid Program – Preventive Services

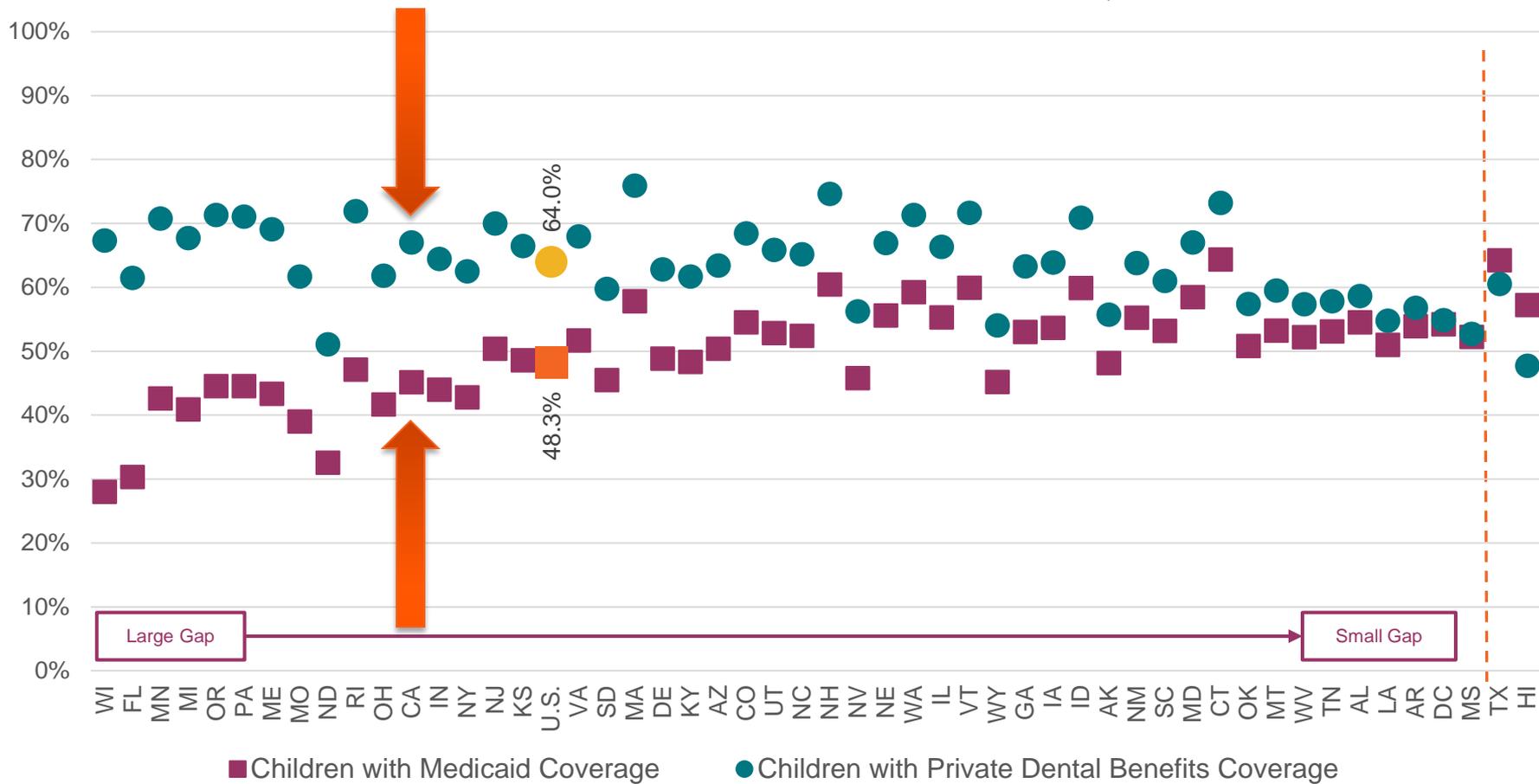
Exhibit PDEnt.3. Geographic Variation in the Preventive Dental Services Measure, FFY 2013 (n = 49 states)



Source: Mathematica analysis of FFY 2013 CMS-416 reports as of August 4, 2014.

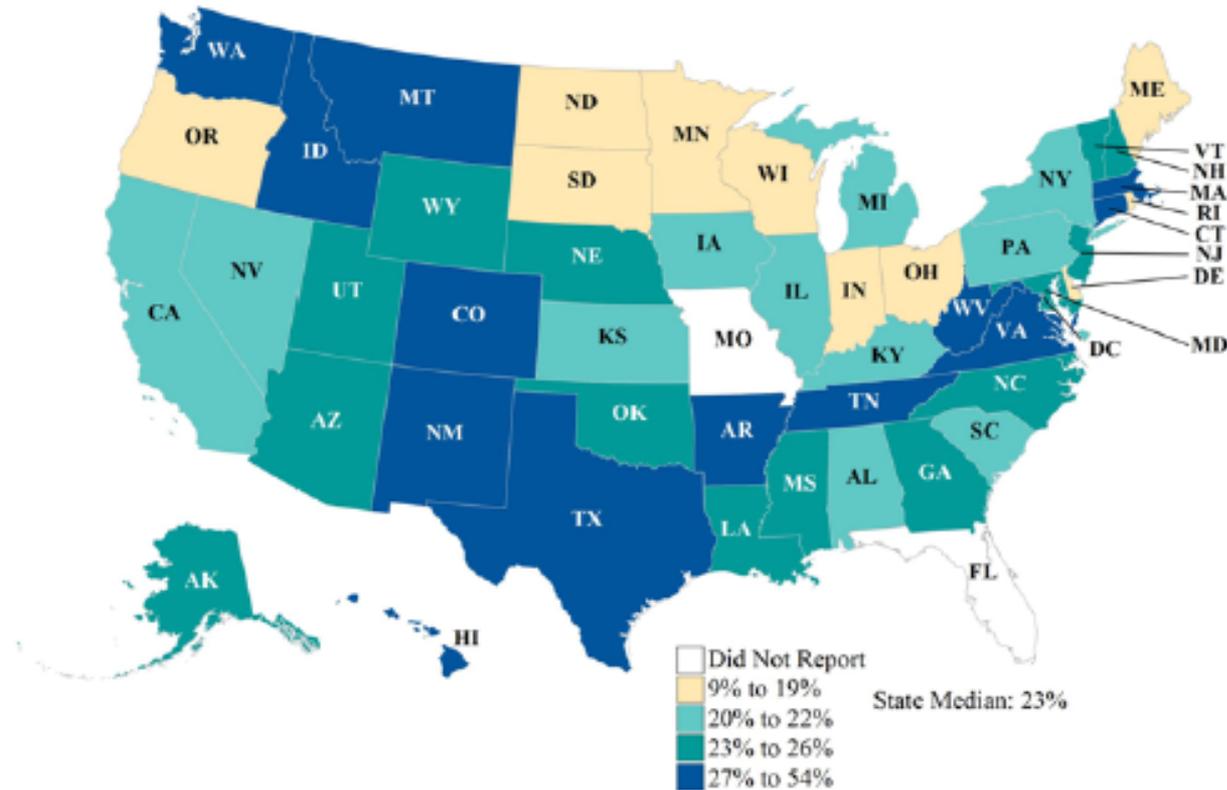
To view state-specific data for this measure, please see Table PDEnt at <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/Downloads/Performance-on-the-Child-Core-Set-Measures-FFY-2013.zip>.

Relative Gap in the Percentage of Children with a Dental Visit in the Past 12 Months, Children with Medicaid and Private Dental Benefits, 2013



Medicaid Program – Treatment

Exhibit TDENT.3. Geographic Variation in the Dental Treatment Services Measure, FFY 2013 (n = 49 states)



Source: Mathematica analysis of FFY 2013 CMS-416 reports as of August 4, 2014.

To view state-specific data for this measure, please see Table TDENT at <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/Downloads/Performance-on-the-Child-Core-Set-Measures-FFY-2013.zip>.

Addressing low utilization of clinical preventive services

Centers for Disease Control and Prevention
MMWR

Morbidity and Mortality Weekly Report
September 12, 2014

Supplement / Vol. 63 / No. 2

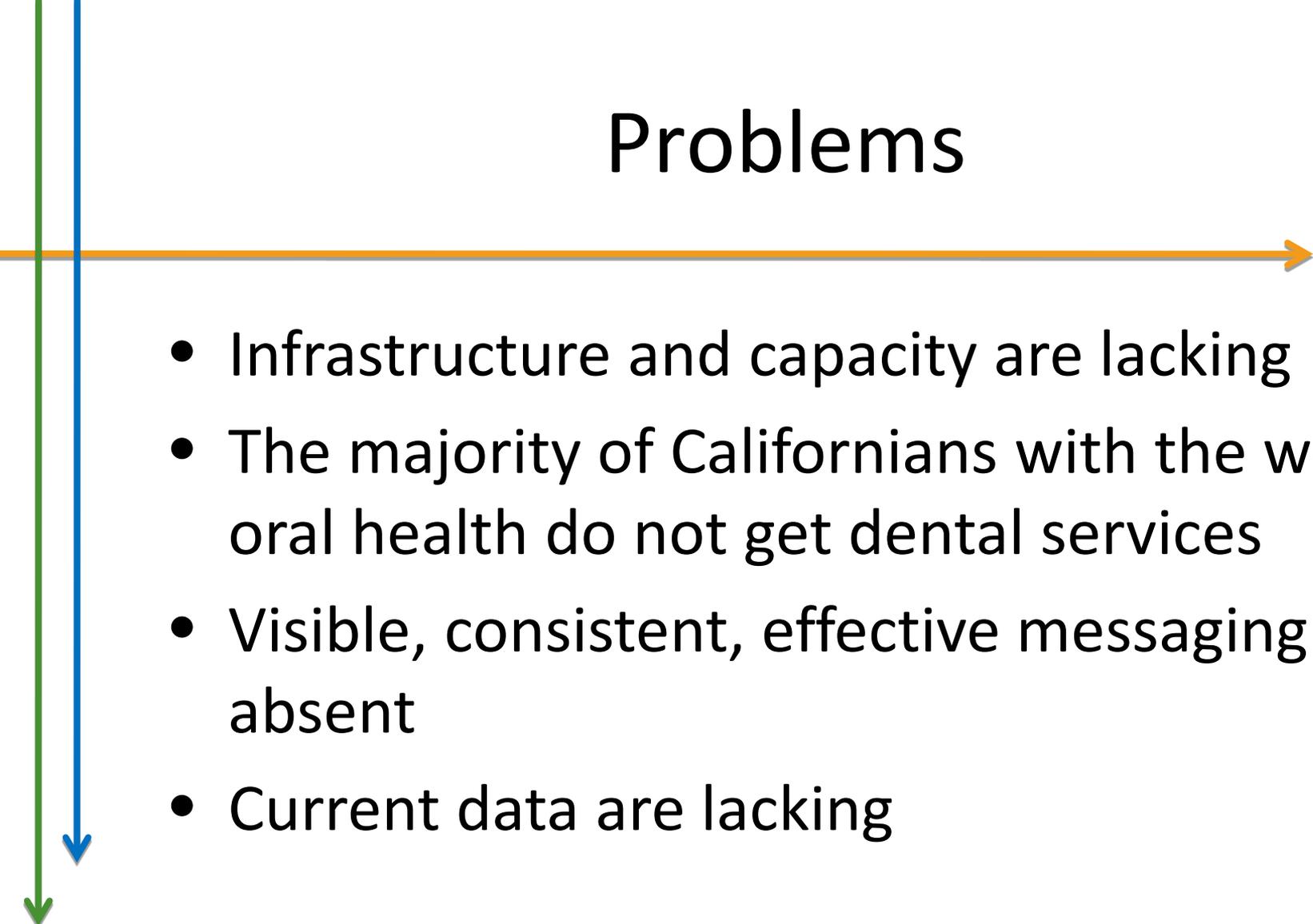
Use of Selected Clinical Preventive Services to Improve the Health of Infants, Children, and Adolescents — United States, 1999–2011



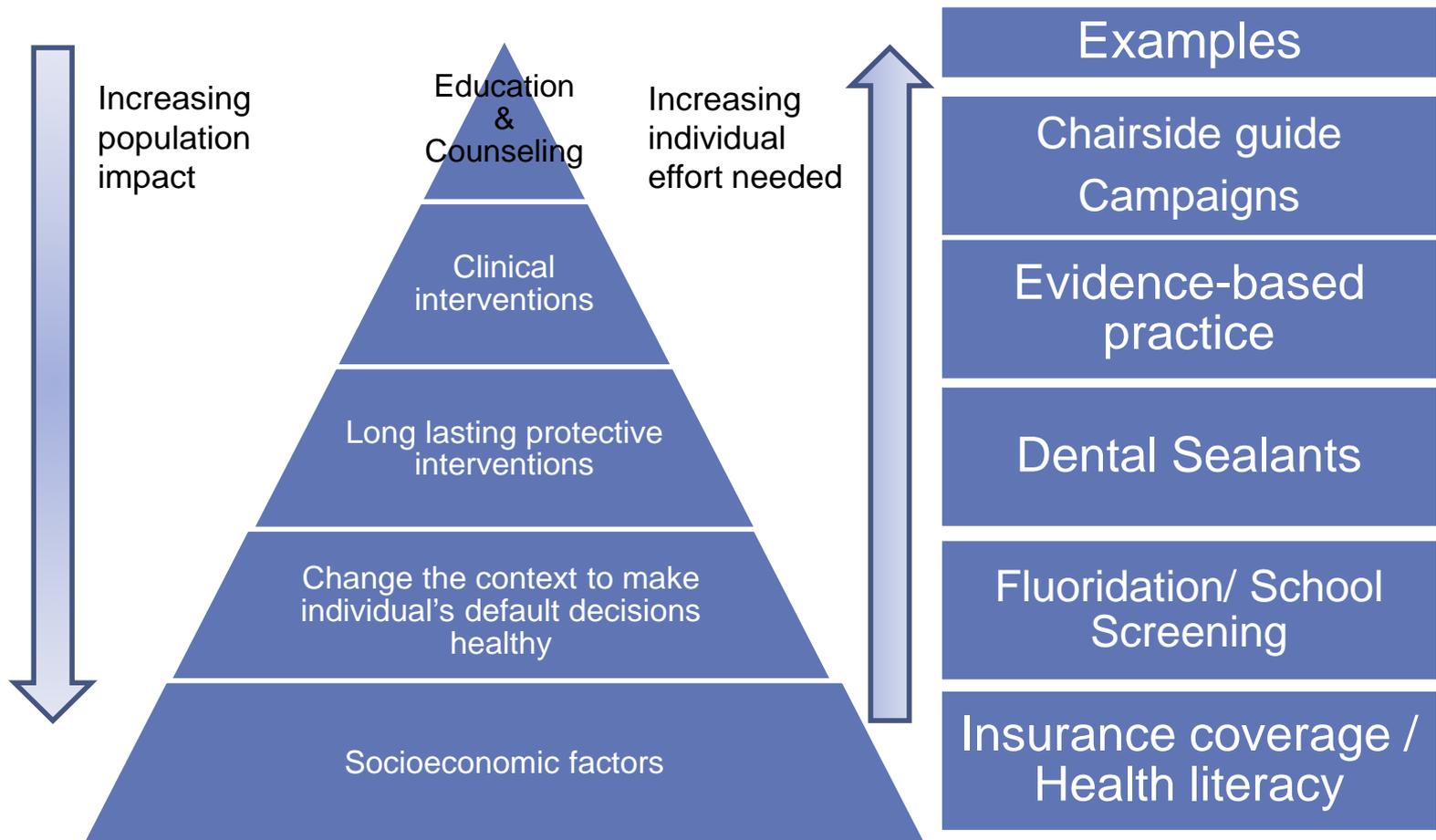
U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

More than half (56%) of children and adolescents did not visit the dentist during the preceding year in 2009, and 86% of children and adolescents did not receive a dental sealant or a topical fluoride application during the preceding year in 2009. (7).

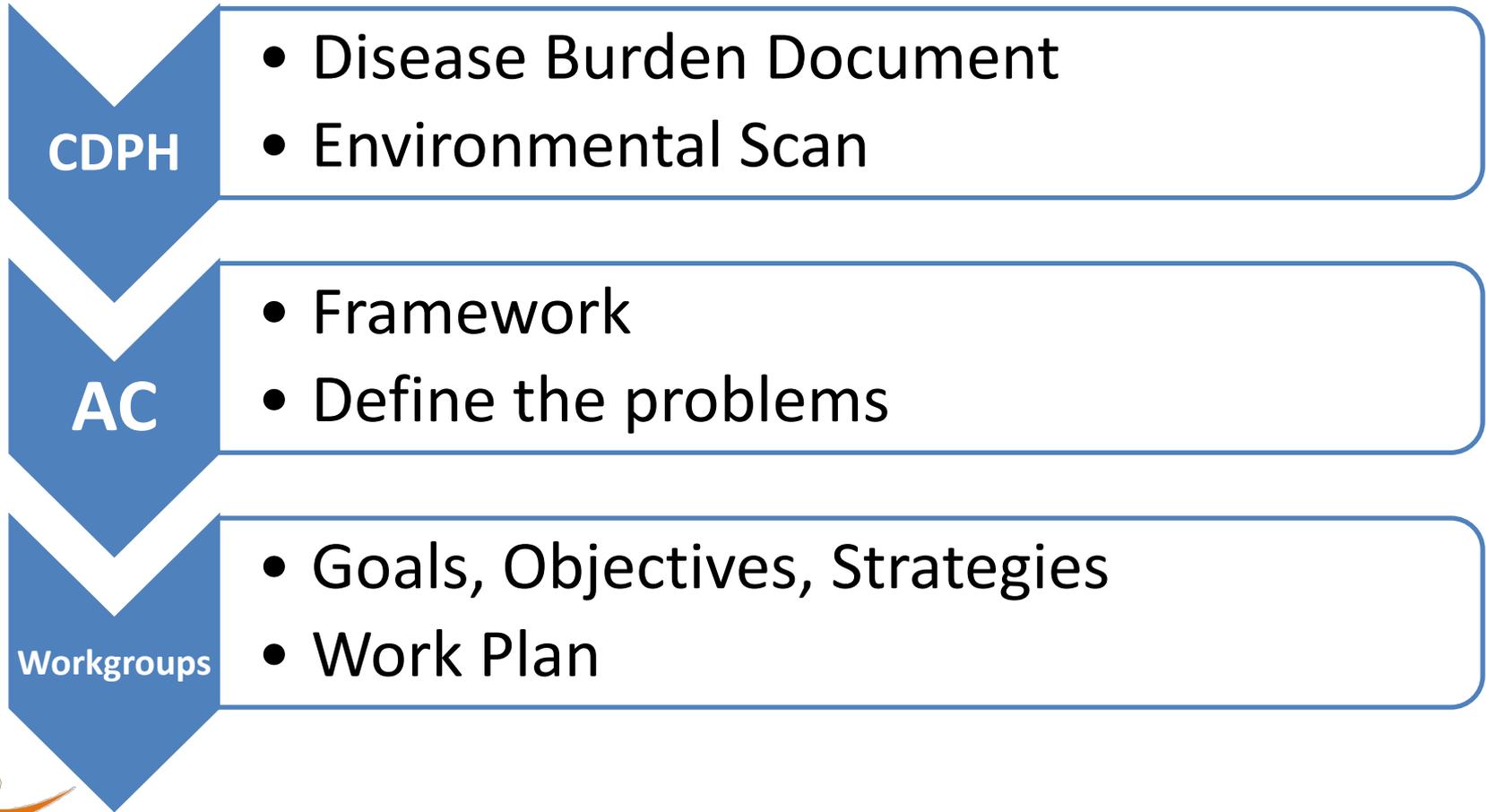
Problems

- 
- Infrastructure and capacity are lacking
 - The majority of Californians with the worst oral health do not get dental services
 - Visible, consistent, effective messaging is absent
 - Current data are lacking

A Framework for Public Health Action: The Health Impact Pyramid

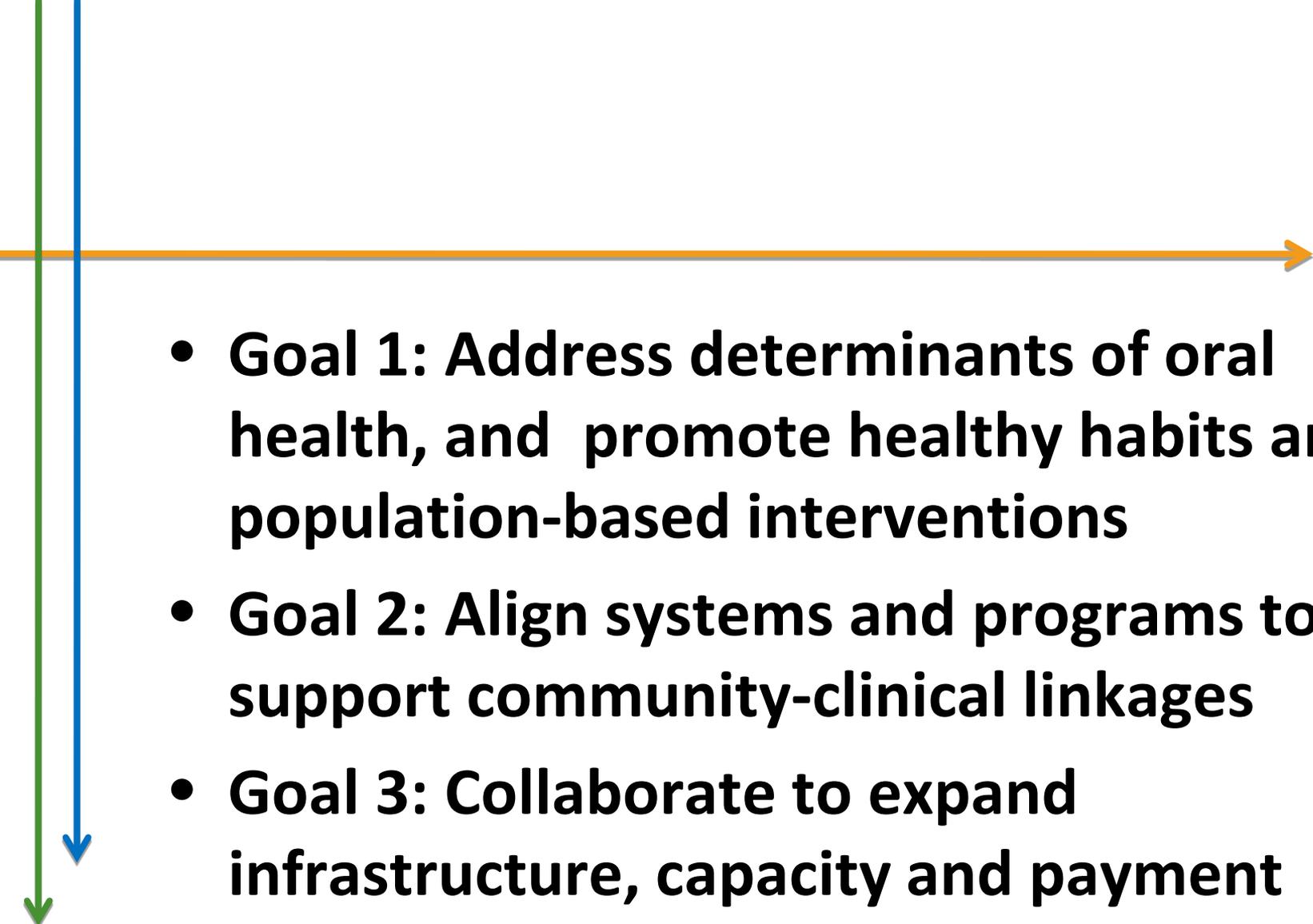


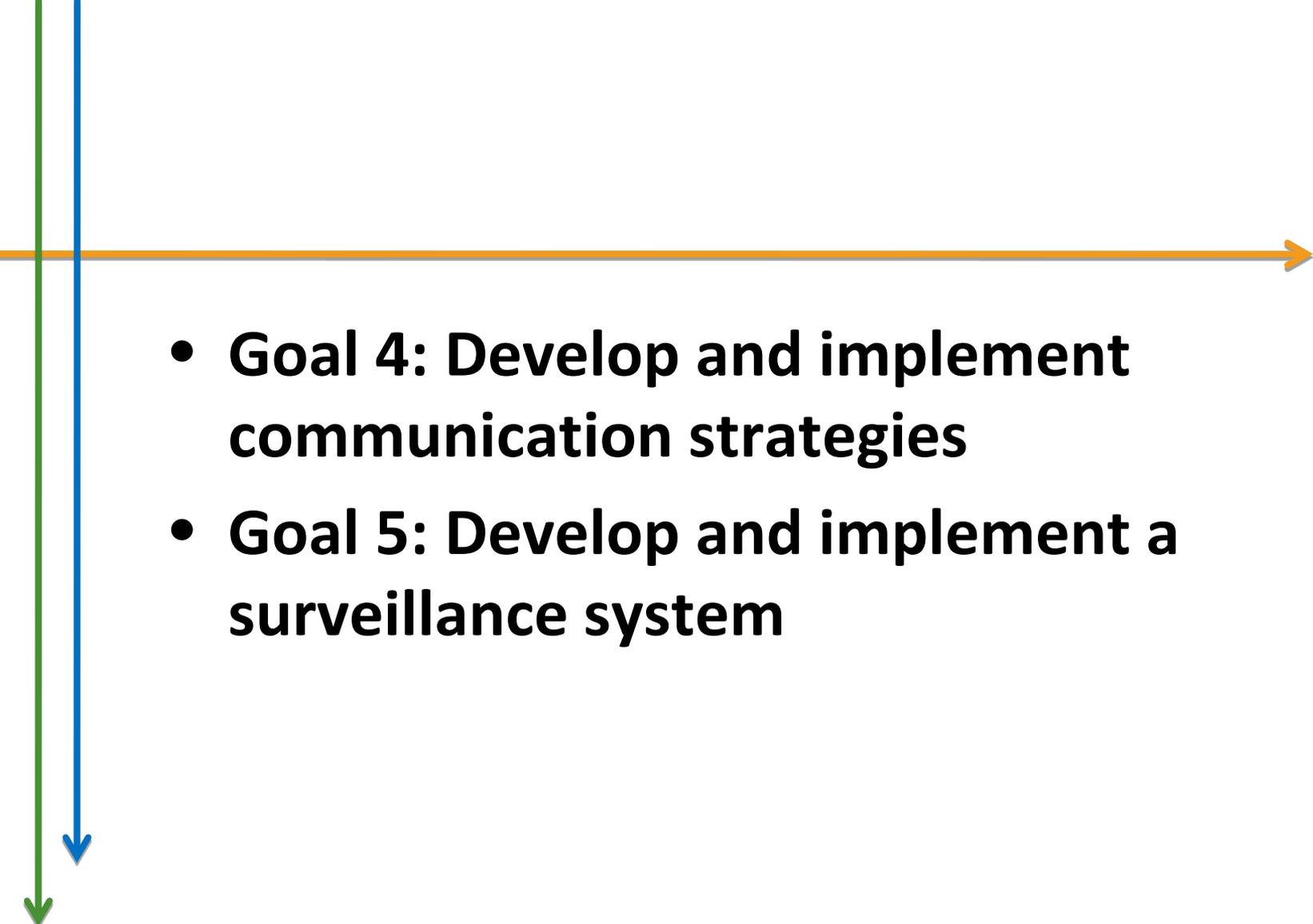
Plan Process





Proposed Goals

- 
- **Goal 1: Address determinants of oral health, and promote healthy habits and population-based interventions**
 - **Goal 2: Align systems and programs to support community-clinical linkages**
 - **Goal 3: Collaborate to expand infrastructure, capacity and payment systems**

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- **Goal 4: Develop and implement communication strategies**
 - **Goal 5: Develop and implement a surveillance system**

Proposed State Oral Health Plan Strategies



Pregnancy

Year 1

Early
childhood

School
entrance

3rd Grade



Brushing – Reducing Sugar

Dental Visit

Inter-professional Collaboration – Community Clinical Linkages –
Dental Care Delivery System

Health Literacy – Insurance Coverage – Water Fluoridation



Dental Transformation Initiative: Dental Initiative Domain Areas

Domain 1: Increase Preventive Services Utilization for Children

Domain 2: Caries Risk Assessment and Disease Management

Domain 3: Increase Continuity of Care

Domain 4: Local Dental Pilot Programs (LDPPs)

Collective Impact

- ✓ Common agenda
- ✓ Shared measurement systems and approaches to evaluating progress
- ✓ Mutually reinforcing activities
- ✓ Continuous, consistent, and open communication
- ✓ “Backbone” support organization(s) to convene and coordinate, including dedicated staff

Contact Information



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