

# TASK FORCE ON CHILDREN'S PREVENTIVE ORAL HEALTH SERVICES BARRIERS AND ROOT CAUSES TO DISCUSS APRIL

#### MORNING

### **Barriers and Root Causes: Dental Providers**

- Not enough dentists actively participate in Medicaid; bias against certain populations and cultural differences; perceived problems of serving Medicaid/CHIP population
- Not enough dentists willing to treat very young patients
- Maldistribution of existing dentists

## **Barriers and Root Causes: Primary Care Providers**

- Primary care providers are not talking to families about dental care and/or referring families for dental care
- Primary care providers not talking to families about the importance of oral health for overall health and well-being or the impact of diet on oral health
- Primary care providers are not trained on what to look for and what to do in different cases
- No standard risk assessment or screening tool for primary care providers to use to assess and refer children

## **Barriers and Root Causes: Medicaid/Policy Issues**

- Medicaid reimbursement too low
- Into the Mouths of Babes ends at 3.5 years

### **AFTERNOON**

## **Barriers and Root Causes: Sealants**

• see handout on the NC Dental Society Meeting on promoting the use of sealants 4/4/13

## **Barriers and Root Causes: Alternative Delivery Sites**

### **Barriers and Root Causes: Dental Providers**

- Dental hygiene laws which require on-site supervision limit ability to provide out-ofoffice care
- NC has strict reciprocity laws
- North Carolina does not train enough dentists
- Alternative provider type