



Task Force on Task Force on Children's Preventive Oral Health Services

North Carolina Institute of Medicine
February 22, 2013



Barriers and Root Causes

- At last meeting divided into groups to discuss barriers and root causes to our three objectives
 1. Increase proportion of Medicaid or CHIP eligible children ages 1-20 who receive preventive dental services by 10 percentage points over the next 5 years
 2. Increasing the proportion of children ages 6-9 enrolled in Medicaid or CHIP who receive a dental sealant on a permanent molar tooth by 10 percentage points in the next five years.
 3. Raise utilization of preventive oral health care among children with Medicaid and Health Choice at county level, including within the medical environment, over the next five years(sealants, fluoride varnish..)



Barriers and Root Causes

- Barriers and Root Causes were brainstormed by objective
 - There was substantial overlap in the barriers/root causes listed for the three objectives
 - Steering committee reorganized the barriers and root causes by categories
- Survey asked people to choose what they thought should be the state's top priorities within four categories
 - Families, Medicaid/Policy, Dental Providers, Primary Care Providers

● ● ● | Barriers and Root Causes

- Handout shows results of survey
- Using results to steer our remaining meetings
- Steering Committee identified issues that could be discussed immediately (today) and those that the Task Force needs more information on
 - Crafting future agendas to provide more information on those topics before discussing potential strategies to address those topics



February

○ Barriers and Root Causes: Families

- Parents do not bring their children in to the dentist. Lack of understanding (and value) of the role and importance of preventive dental services (especially for very young children)
- Scheduling barriers (including time off work, kids out of school, hard to get appointments, restrictive office hours)
- Unaware of Medicaid coverage for dental services
- Low health literacy/inability to navigate the system
- Transportation problems



February

- 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



March

- Barriers and Root Causes Dental Providers
 - Sealants: underutilization points to a need for dental provider education and training on use of sealants
- Barriers and Root Causes: Medicaid/Policy Issues
 - Sealants: Medicaid benefit policy does not align with evidence on sealants (# of times can/should be applied)
 - Medicaid reimbursement is too low
 - Lack of dental access points outside the dental office



April

- 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



April

- Barriers and Root Causes: Medicaid/Policy Issues
 - Into the Mouths of Babes ends at 3.5 years
- Barriers and Root Causes: Dental Providers
 - Dental hygiene laws which require on-site supervision limit ability to provide out-of-office care
 - NC has strict reciprocity laws
 - North Carolina does not train enough dentists
 - Alternative provider type (i.e. dental therapist)



What Next?

- The Task Force will brainstorm strategies to address these barriers and root causes at each meeting
- Following the meeting we will send out a survey to Task Force members to identify the most important strategies for DMA to include in our state plan
- Use the results of those surveys to develop North Carolina's state plan which will then be reviewed by the Task Force