The Faces of Oral Health in New Hampshire

February 13, 2015

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The Faces of Oral Health

- Oral health is essential to total health-
- "You can't be healthy without good oral health"

NH's Surgeon General - C. Everett Koop

Oral disease

- Highly prevalent- "across the lifespan"
- Ranging from cavities to cancer
- Painful, costly and preventable

NH's Oral Health Program

- Established in 1998
- Funded annually 44% from CDC Preventive Health Block Grant and 55% from state funds

- $520,000 to deliver care through 15 community & school-based oral health contracts with DPHS

- Since 2012 OHP has secured federal grants
  - CDC Cooperative Agreement to improve OHP capacity
  - HRSA Oral Health Workforce Grant –support construction of 2 new rural dental centers

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OHP writes grants to fund all other projects

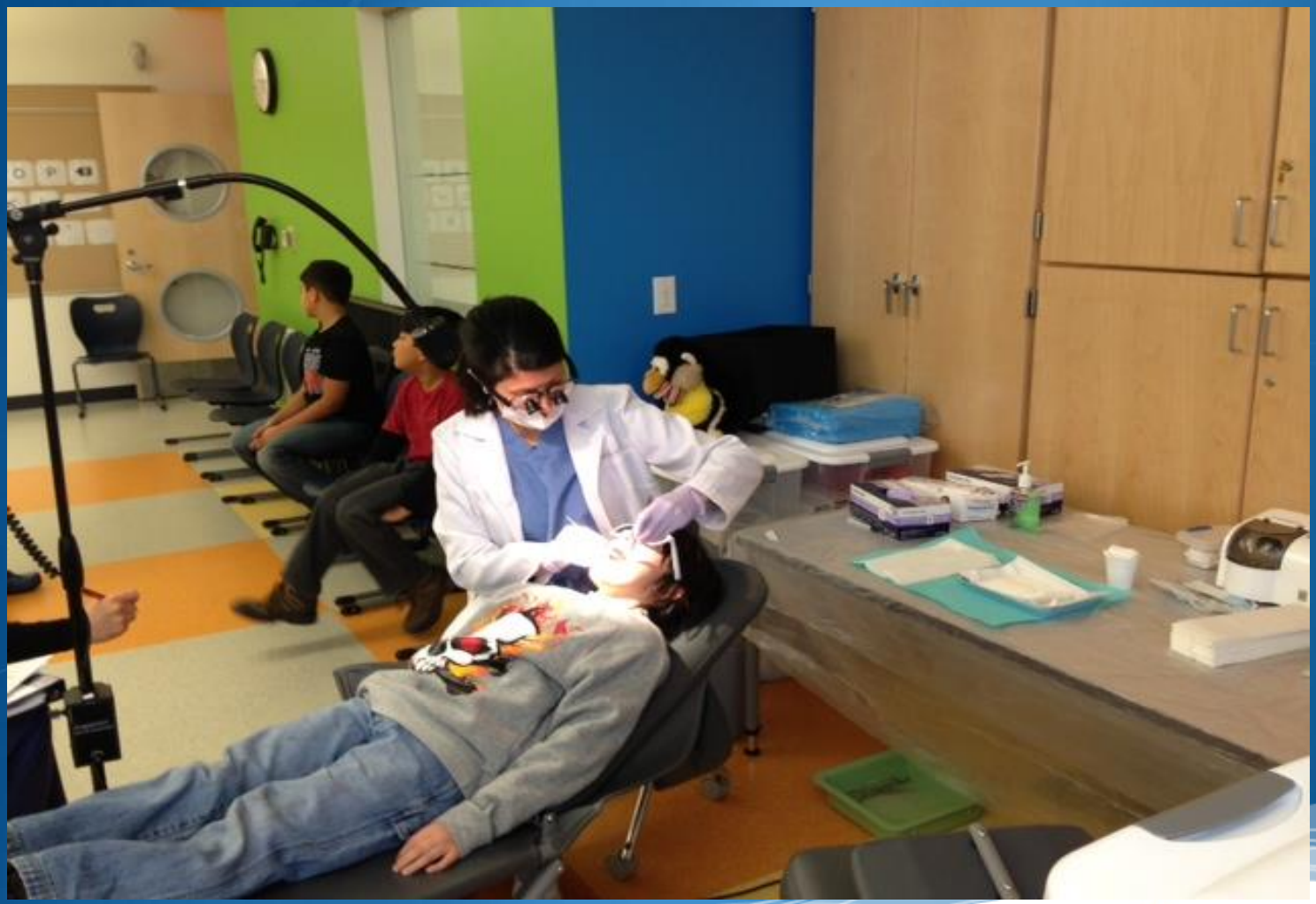
- Head Start Oral Health Survey
- Women, Infants, & Children (WIC) *Pay for Prevention* Project
- 2014 Third Grade OH/BM I Survey
- Refugee Oral Health Care Days
  - Manchester refugees Greater Nashua Dental Connection
  - Concord Refugees at NHTI Dental Center
- 2014 Senior Oral Health Survey

Mid-State Health Center, Bristol Office

Rural underserved area
5 dental chairs for a dentist, hygienist & assistants
Oral health integrated with primary care

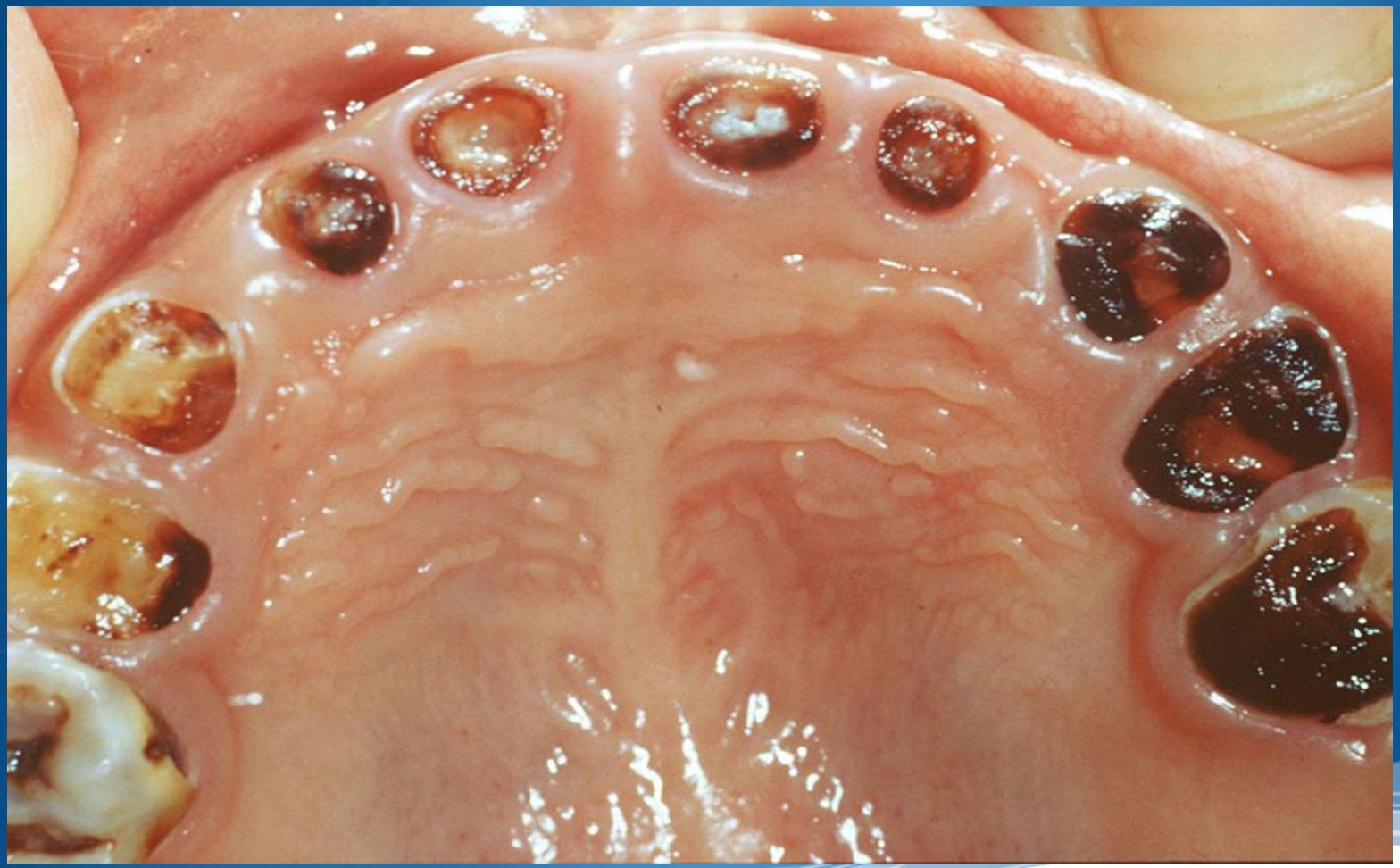
Across the Lifespan-The School Years

Preventive Treatment Option



School-based

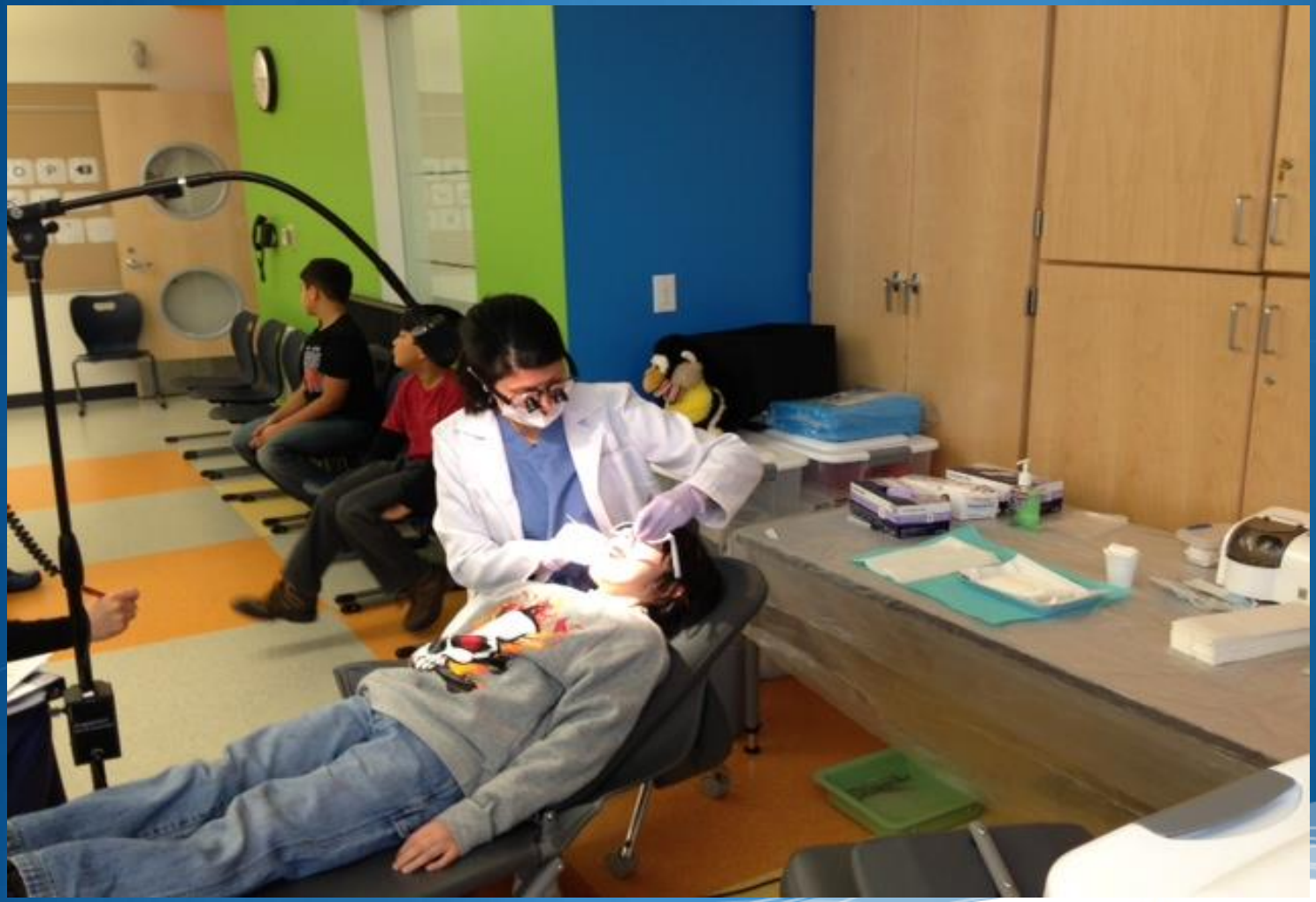
Early Childhood Caries-ECC



Reparative Treatment Option

Hospital-based

Preventive Treatment Option

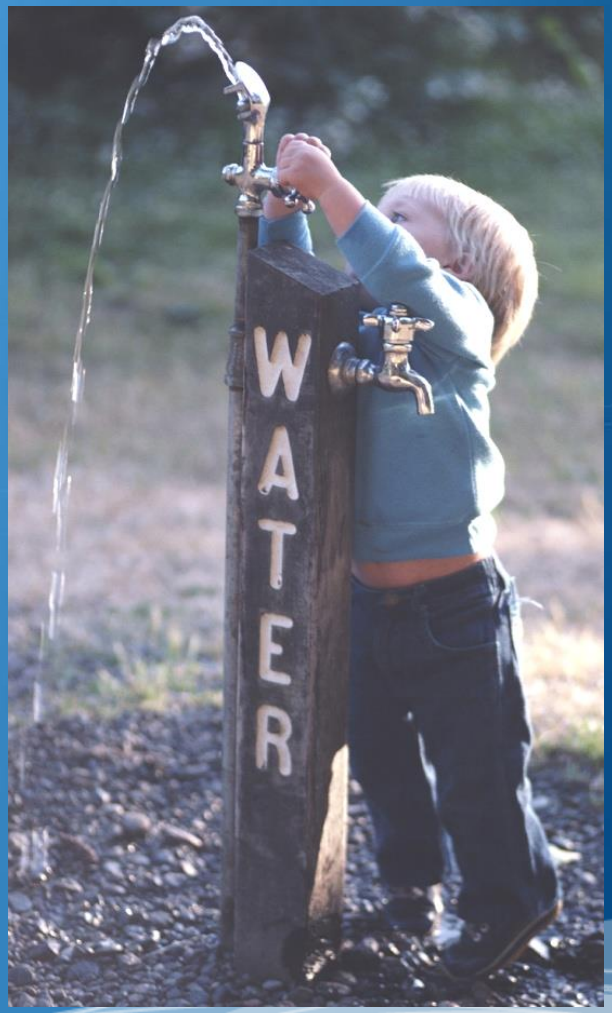


Evidence-Based Dental Disease Prevention

- ✓ Dental Sealants
- ✓ Community Water Fluoridation

DENTAL SEALANTS

Community Water Fluoridation



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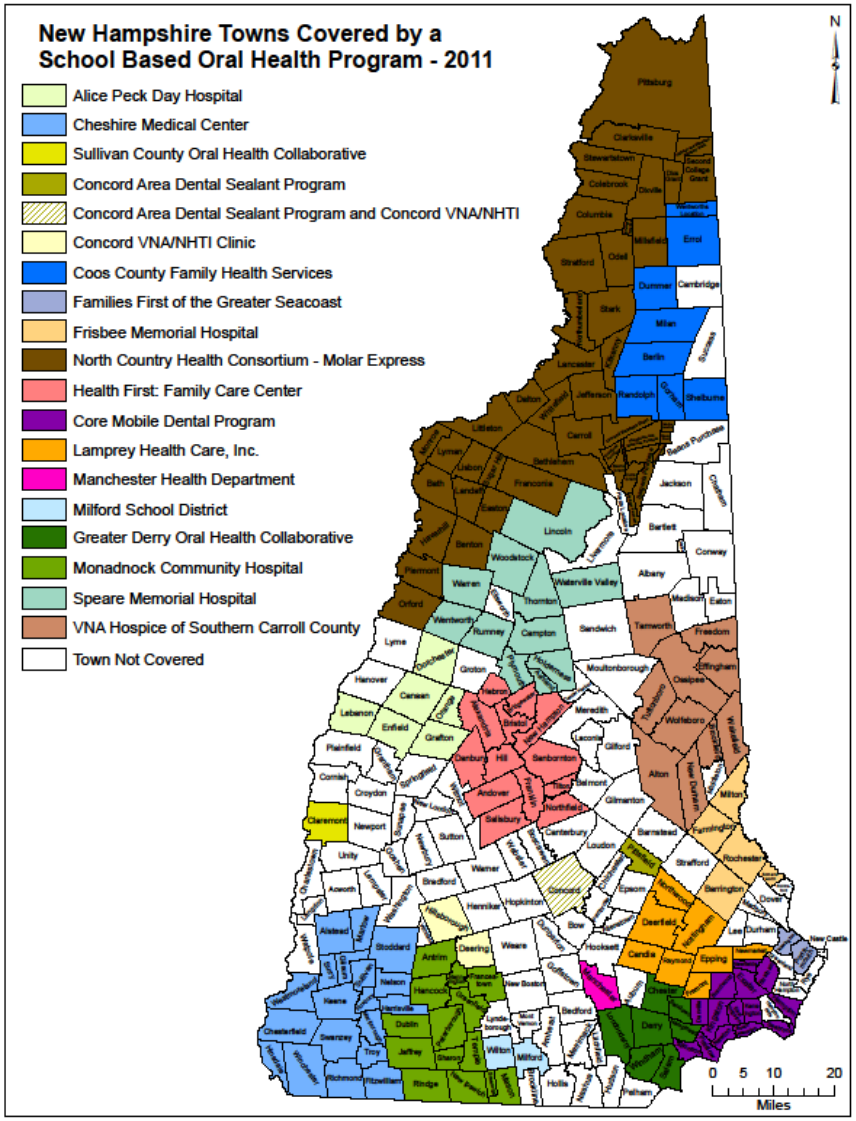

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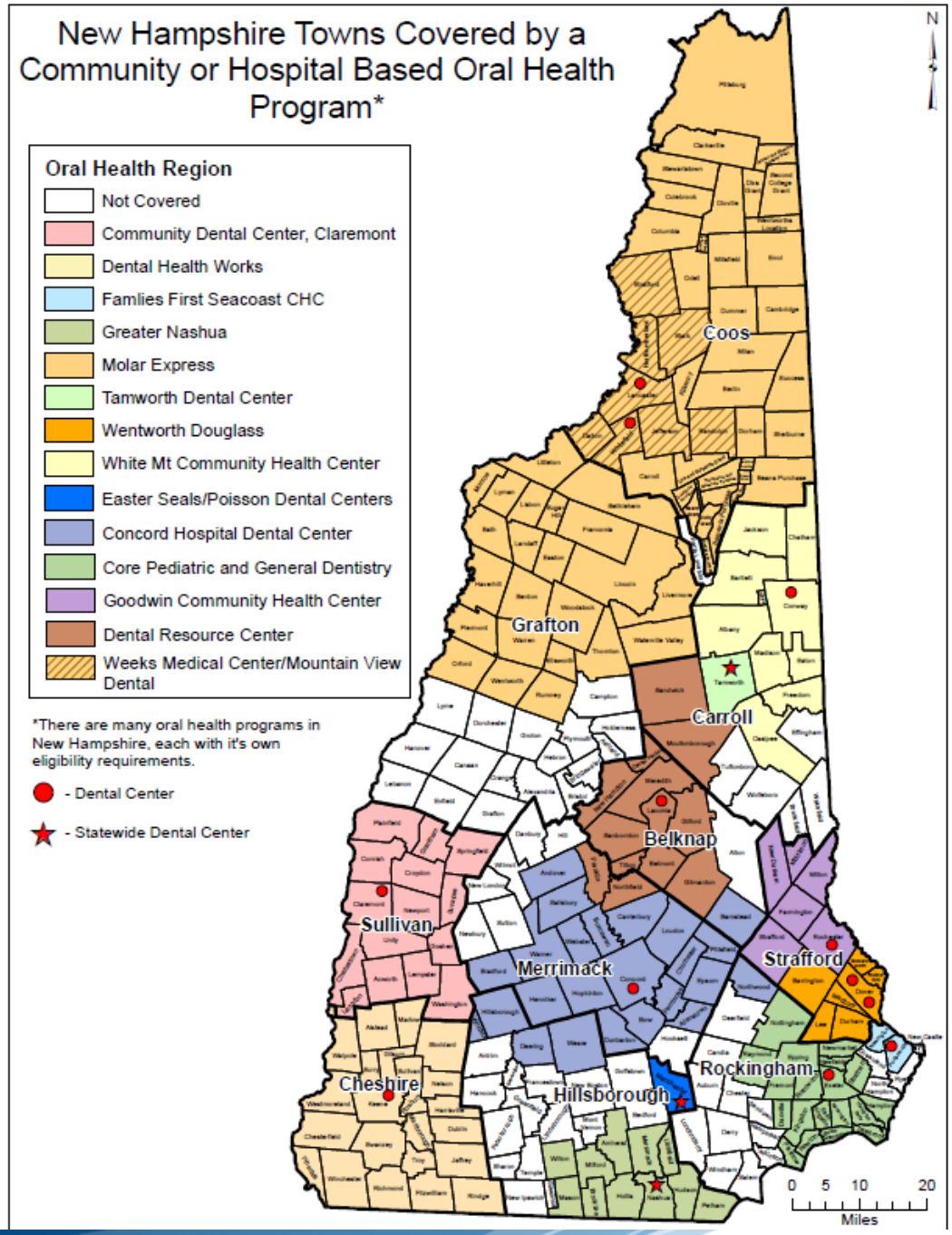
New Hampshire Towns Covered by a Community or Hospital Based Oral Health Program*



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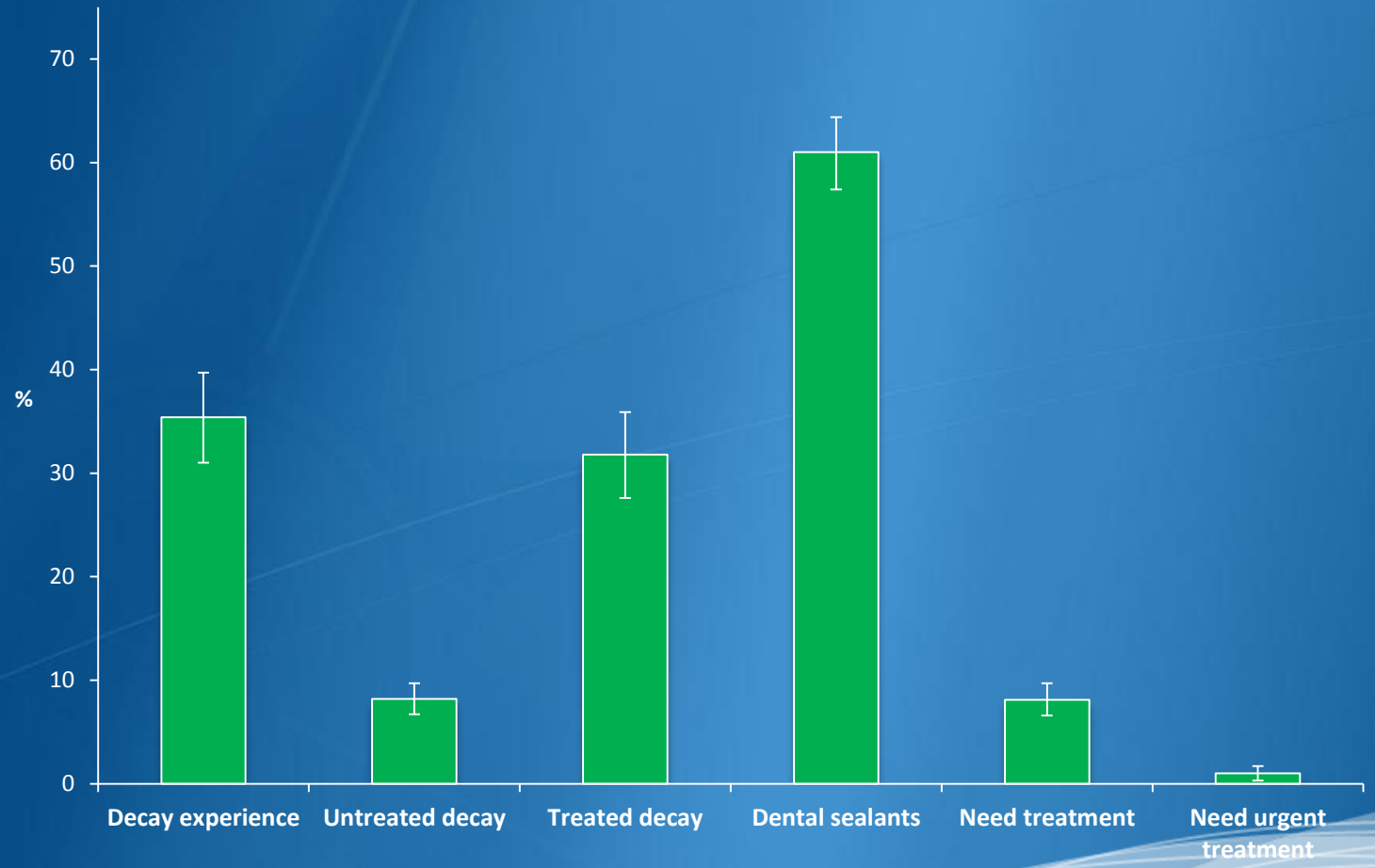
2014 NH *Healthy Smiles-Healthy Growth* Third Grade OH/BMI Survey Results



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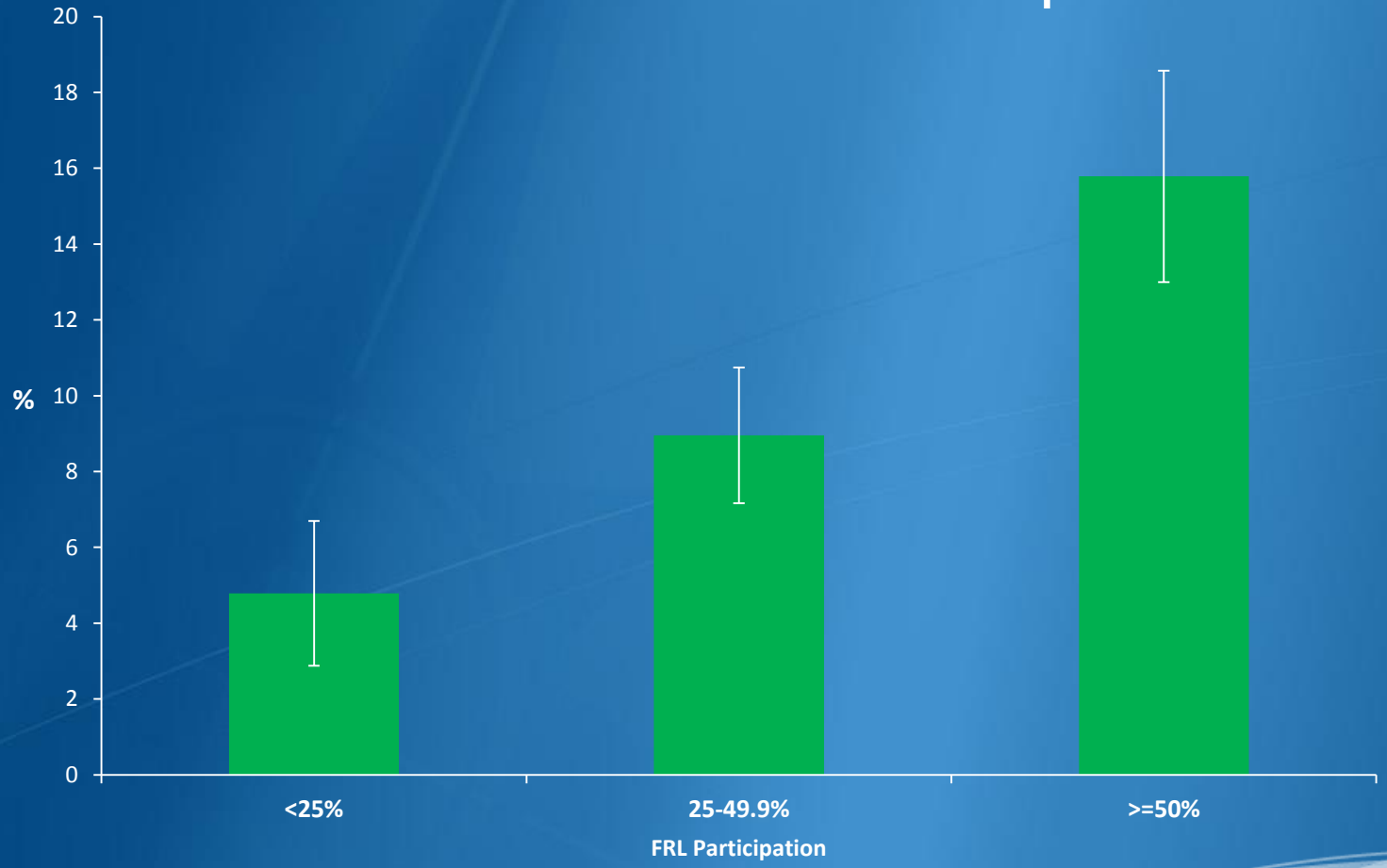
Untreated Decay by Free & Reduced Lunch Participation in Schools



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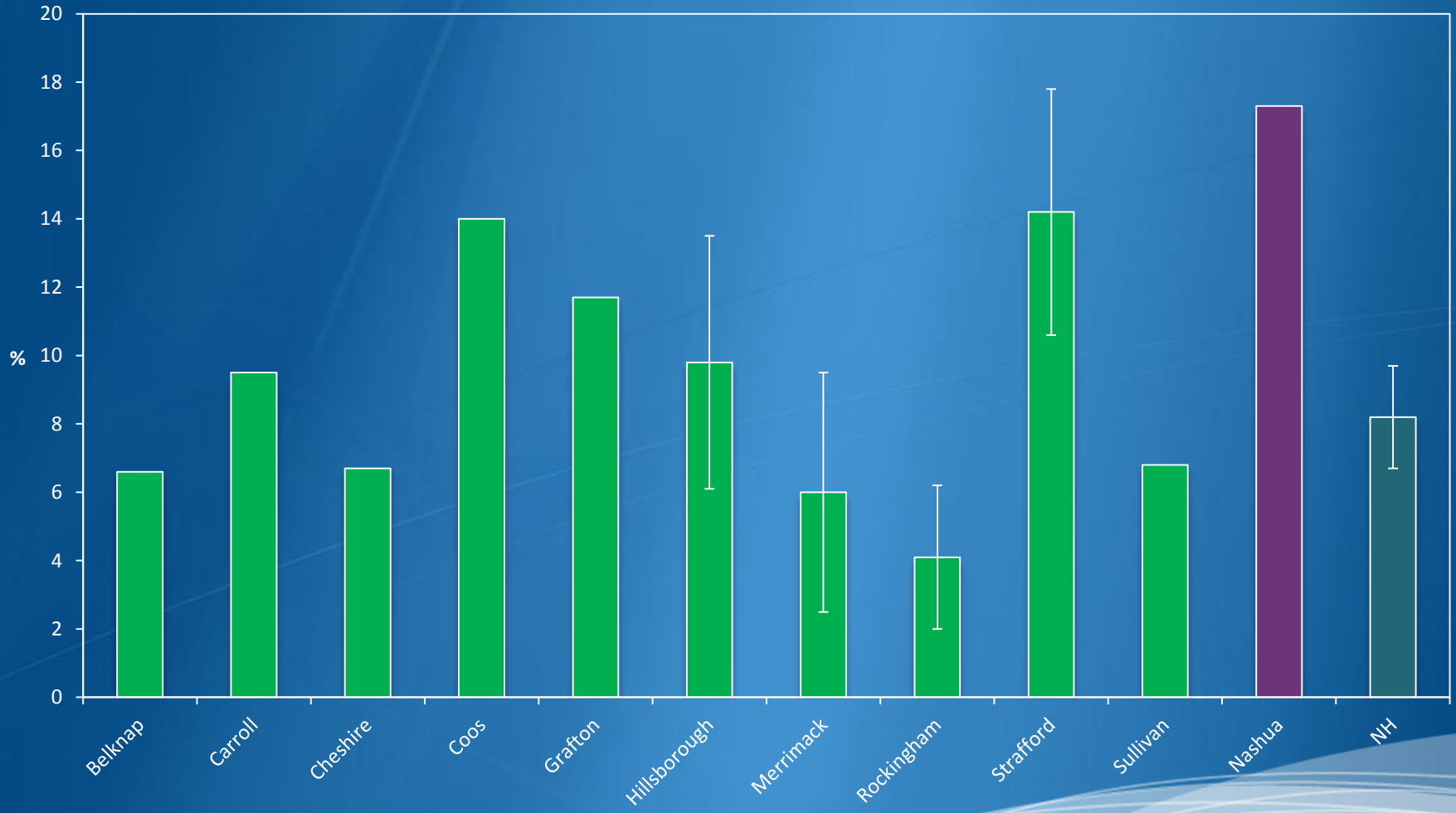
Untreated Decay by County, State & City of Nashua



WIC *Pay for Prevention* Project

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Improvements in Children's Oral Health in NH 2009 to 2014

- 54.4% decrease in untreated decay in Coos County
- 31.7% decrease in untreated tooth decay statewide
- 32.5% decrease in children with urgent dental needs (required immediate attention)
- 20.4% increase in dental sealants in schools with more than 50% of students that qualify for Free or Reduced Lunch

Reasons for Success

- Early prevention intervention-fluoride varnish & dental sealants
- OH education for families

Oral Health Program Partners

- NH Medicaid
- CAP Agencies
- Federally Qualified Health Centers (FQHCs)
- NH Oral Health Coalition
- WIC
- Bureau of Elderly & Adult Services (BEAS)
- Public Health Dental Providers
- Foundations
  - HNH Foundation
  - Jessie B. Cox Charitable Trust Fund
  - Foundation for Healthy Communities
  - Northeast Delta Dental Foundation
  - NH Dental Society Foundation
- Private dental offices

HNH FOUNDATION
Healthy Kids. Healthy Places.

New England NESS Systems & Software

DELTA DENTAL
Northeast Delta Dental

FOUNDATION FOR HEALTHY COMMUNITIES

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ACROSS the LIFESPAN

Adult Oral Health Facts

NH Medicaid provides a limited adult dental benefit that covers tooth extraction and relief of pain and infection

Medicare does not include a dental benefit

Veterans do not have a dental benefit

Oral health problems such as inflammatory periodontal disease and tooth decay are linked to:

- cardiovascular disease,
- type 2 diabetes,
- respiratory disease, and
- cancer.

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2014 NH Senior Oral Health Survey

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Results from 2014 NH Senior Oral Health Survey

- 610 older adults 60 + years surveyed
- 26 senior centers statewide
- 38 seniors with urgent need received restorative treatment

FINDINGS

- 18.4 % of older adults have dental insurance that pays for regular care
- 15.9 % have lost all their natural teeth which impacts their quality of life
- 25.4 % have untreated decay or sharp root fragments
  older adults
- Older adults living in rural NH & those with low incomes have significantly greater need for care

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OHP Collaboration with the Bureau of Elderly and Adult Services

- 38 older adults identified with urgent/early care dental needs received dental treatment
- 5 health centers provided care through oral health contracts with BEAS
- BEAS provided payment for treatment using BEAS Title III federal funding

Dental Visits to Hospital Emergency Departments

- Only asthma outpaces dental visits to NH hospital EDs
- EDs provide convenient treatment for episodic care
- More appropriate treatment delivered in primary dental office
- Dental patients don’t receive definitive care in ED

Dental Visits to Hospital Emergency Departments

- Most frequent users - self paying adults 25-44 years
- 2001- 2007 47% increase in dental visits in NH EDs
- 2001- 2007 NH costs increased from $1.8 to $5.9 million (total $26.9 million over 7 years)
- Misuse of limited resources

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Challenges to Accessing Oral Health Care in NH

- No Medicaid dental coverage for NH adults over 21 years
- No dental coverage for older adults 65 + on Medicare
- Oral health workforce is located mostly in Southern NH
- Limited public transportation for travel to dental appointments, especially in rural NH
- Few dentists to treat people with disabilities
- Few dentists to treat non-English speaking people, interpretive services are costly

For More Information

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