

9/2021

# Oral Health Quality in Medicaid and CHIP

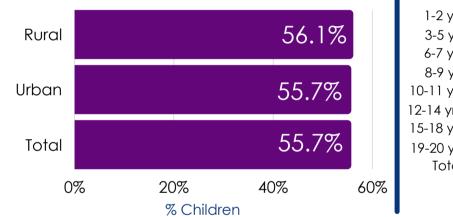
Connecticut <21 years

## **Overview: Child Healthcare Quality**

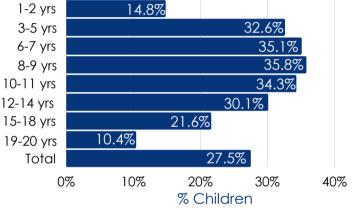
| Year                   | Any Service<br>(% children) | Oral Evaluation<br>(% children) | Caries Risk<br>Documentation<br>(% children) | Topical Fluoride<br>≥ 2/year<br>(% children) | Caries-Related ED<br>Visits Per 100,000<br>Member Months |
|------------------------|-----------------------------|---------------------------------|--|--|--|
| 2018                   | 65.5% \downarrow            | 55.7% 🖊                         | 7.7%   | 27.5% 🖊                                      | 22.2 🔶   |
| 2017                   | 67.2%                       | 57.7%                           | 7.1%   | 29.5%  | 24.3   |
| 2016                   | 67.6%                       | 58.2%                           | 5.3%   | 29.5%  | 21.5   |
| National Sample, 2018* | <b>52</b> .1%               | 47.2%                           | 3.7%   | 21.2%  | 26.8   |

\*Based on analysis of 29 states. See <u>DQA Oral Health Quality Reports</u> for more info.

#### Oral Evaluation by Geography, 2018



#### Topical Fluoride at Least 2/Year by Age, 2018



56% of children had an oral evaluation.

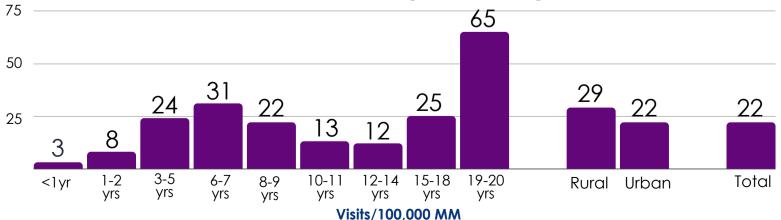


1 in 3 children 6-11 years and 1 in 10 children 19-20 years had at least 2 topical fluoride applications.

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Children aged 19-20 years had 3 times as many ED visits as the program average.

### Caries-Related ED Visits by Age and Geography, 2018



Source: Analysis of Transformed Medicaid Statistical Information System (T-MSIS) Analytic Files (TAF) [CY 2016, Release 2; CY 2017 & CY 2018, Release 1], Centers for Medicare & Medicaid Services. Analyses conducted by Key Analytics and Consulting. Contact dqa@ada.org for questions or additional data. 2021 American Dental Association on behalf of the Dental Quality Alliance (DQA)@ All rights reserved.