Oral Health Quality Indicators for the Maternal and Child Health Population

The Center for Oral Health Systems Integration and Improvement (COHSII) Quality Indicator Advisory Team identified a set of maternal and child health (MCH) quality indicators to monitor oral health services delivered in public health programs and systems of care. Learn more at https://www.mchoralhealth.org/cohsii/quality.php.

Set of Indicators: Women of Child Bearing Age and Pregnant Women

Access
- Percentage of pregnant women reporting difficulty getting dental care (data source: Pregnancy Risk Assessment Monitoring System)
- Percentage of pregnant women who had insurance to cover dental care during pregnancy (data source: Pregnancy Risk Assessment Monitoring System)

Utilization
- Percentage of pregnant women who reported having their teeth cleaned by a dentist or dental hygienist during pregnancy (data source: Pregnancy Risk Assessment Monitoring System)
- Percentage of women of child-bearing age (18–44 years) who report having a visit to a dentist or dental clinic in the past year (data source: Behavioral Risk Factor Surveillance System)

Outcomes
- Percentage of pregnant women reporting that they needed to see a dentist for a problem during pregnancy (data source: Pregnancy Risk Assessment Monitoring System)

Set of Indicators: Children

Access
- Dentists who actively participate in Medicaid per 1,000 EPSDT eligible enrolled children (data source: Medicaid enrollment and claims)

Utilization
- Percentage of children who had a dental visit in the past 12 months (data source: Medicaid enrollment and claims)
- Percentage of children at elevated risk receiving preventive dental services (data source: Medicaid enrollment and claims)

Process
- Percentage of children at elevated risk receiving at least 2 topical fluoride applications as a dental service (data source: Medicaid enrollment and claims)
- Percentage of children at elevated risk receiving at least 2 topical fluoride applications as an oral health service (data source: Medicaid enrollment and claims)
• Percentage of children aged 6–9 years at elevated risk who receive sealants in their permanent first molars (data source: Medicaid enrollment and claims)
• Percentage of children aged 10–14 years at elevated risk who receive sealants in their permanent second molars (data source: Medicaid enrollment and claims)

Outcomes
• Percentage of kindergarten children with dental caries experience (treated or untreated tooth decay) (data source: Basic Screening Survey)
• Percentage of 3rd grade children with dental caries experience (treated or untreated tooth decay) (data source: Basic Screening Survey)
• Percentage of kindergarten children with urgent dental treatment needs (data source: Basic Screening Survey)
• Percentage of 3rd grade children with urgent dental treatment needs (data source: Basic Screening Survey)

About the Center for Oral Health Systems Integration and Improvement

The COHSII consortium promotes oral health knowledge and skills. COHSII works with key stakeholders to improve systems of care in support of a quality-improvement, patient-centered approach to addresses the oral health needs of the MCH population. The consortium is led by the National Maternal and Child Oral Health Resource Center working in collaboration with the Association of State and Territorial Dental Directors and the Dental Quality Alliance.

Over the 4-year project period, COHSII will address three functions: (1) providing training and technical assistance to states and MCHB-funded oral health projects, (2) establishing a set of MCH oral health quality indicators, and (3) developing and disseminating resources.

Permission is given to photocopy this publication or forward it, in its entirety. Requests for permission to use all or part of the information contained in this publication in other ways should be sent to the address below.

National Maternal and Child Oral Health Resource Center  Georgetown University
Box 571272
Washington, DC 20057-1272
(202) 784-9771
E-mail: OHRCinfo@georgetown.edu  Website: www.mchoralhealth.org

This publication was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under award #U44MC30806 for the National Maternal and Child Center for Oral Health Systems Integration and Improvement in the amount of $4,000,000 over 4 years with no funding from nongovernmental sources. This information or content and conclusions are those of the authors and should not be construed as the official policy of HRSA, HHS, or the U.S. government, nor should any endorsements be inferred.

April 2019