

Oral Health in Colorado: Progress and Opportunities

2017 ENVIRONMENTAL SCAN PREPARED FOR THE DELTA DENTAL OF COLORADO FOUNDATION

EXECUTIVE SUMMARY: JULY 2017

The Colorado Health Institute prepared an environmental scan of oral health in Colorado to support the strategic planning efforts of Delta Dental of Colorado Foundation (DDCOF).

The scan highlights how demographics, physical health status, oral health status, insurance coverage, care utilization, public health interventions, and oral health workforce availability in Colorado have changed since DDCOF's last strategic plan was completed in 2012. It also identifies policy developments that support progress and discusses opportunities for closing gaps.

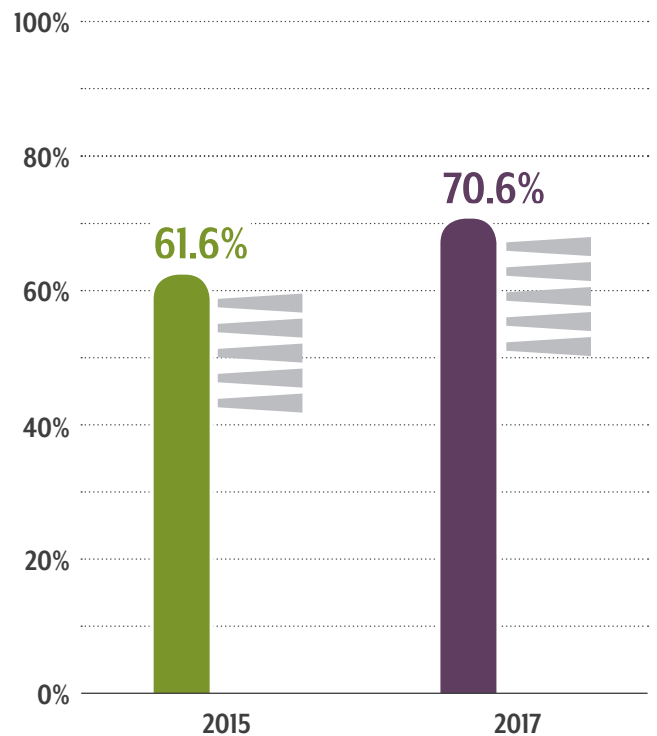
Key findings from the scan:

Rates of insurance coverage – medical and dental – are at an all-time high.

Nearly all Coloradans (93.3 percent) have medical insurance, and 70.6 percent have dental insurance, up from 61.6 percent in 2013. Two of three low-income Coloradans have dental insurance, a result of Colorado's dual decisions to expand Medicaid to low-income adults and offer a dental benefit to all enrollees. Coverage matters. Coloradans with dental insurance ARE more likely to get care. Children between the ages of 0 and six with dental insurance are three times as likely to get care as those without.

Despite coverage gains, 29 percent of Coloradans go without dental insurance, a rate much higher than the medically uninsured rate. More than half of Coloradans over the age of 65 (54 percent) lack dental insurance. Pregnant women covered by Child Health Plan *Plus* (CHP+) do not have dental benefits. And one of five enrollees in Medicaid – which offers a dental benefit – say they do not have dental insurance, presenting opportunities for improving insurance literacy.

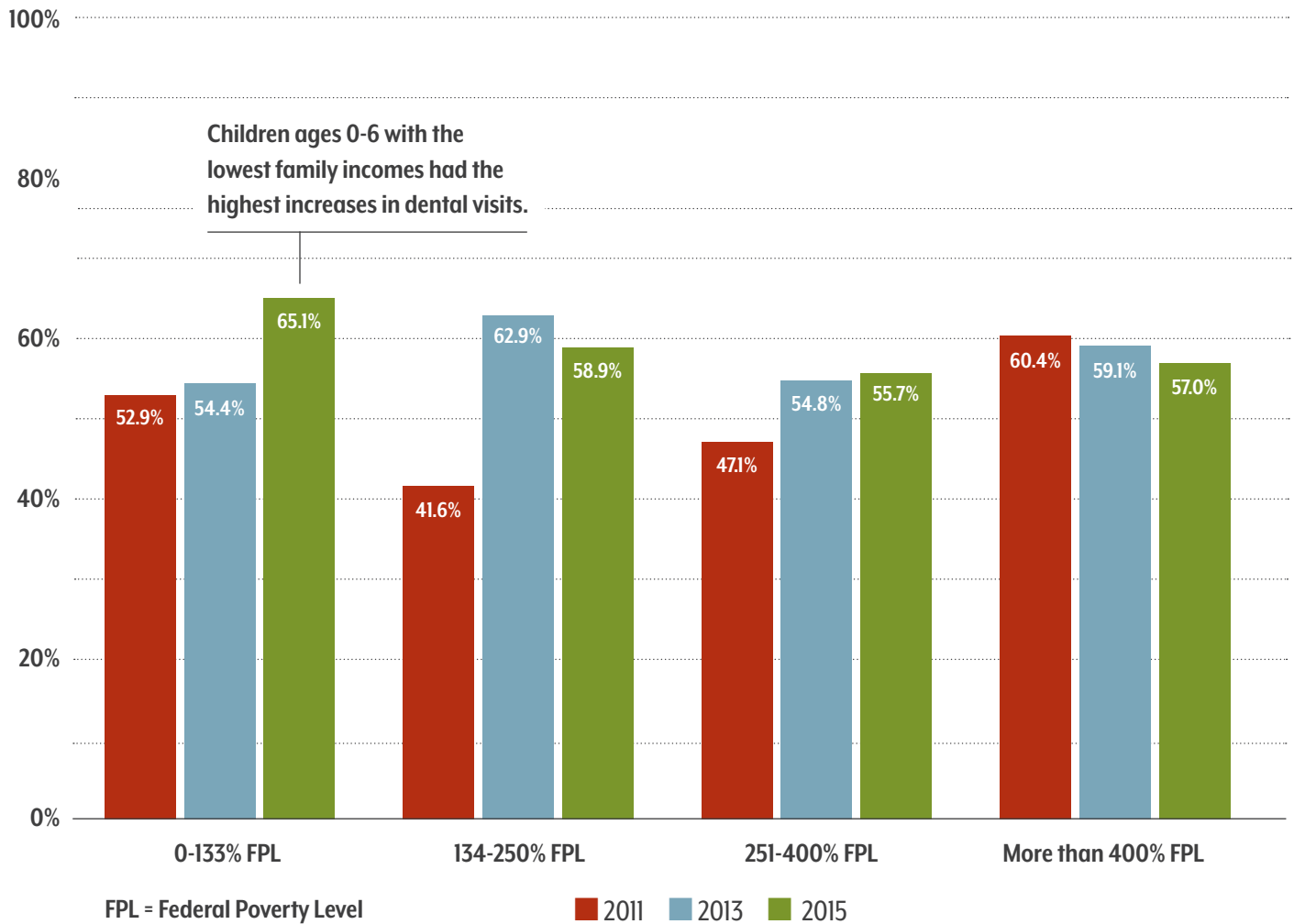
Figure 1. Percentage of Coloradans with Dental Insurance



More Colorado children – including low-income children and children who speak Spanish – are seeing dental providers.

Six of 10 children between the ages of 0 and six saw a dental provider in 2015, up from 57 percent in 2013. The lowest-income children had the highest increase in rates of dental visits among all children between

Figure 2. Children Ages 0-6 Who Visited a Dentist or Hygienist in Past 12 Months, by Income



the ages of 0 and 17. The rate of dental visits among children between the ages of 0 and six who speak Spanish increased from 64.5 percent in 2016 to 79.6 percent in 2015.

However, about one of 10 children ages 0-1 got care in 2015, down slightly from 12 percent in 2013. Nearly all infants (99.6 percent) visited a medical provider in 2015.

Prevention efforts are growing, but impacts on tooth decay are uncertain.

More children are brushing daily and getting preventive services, including sealants. The number of Medicaid enrollees ages 6-9 receiving sealants grew steadily from 21,745 in 2013 (18.5 percent of enrollees ages 6-9) to 25,242 in 2015 (17.7 percent of enrollees).

Nearly half (44 percent) of low-income parents say their children ages 6 months-12 months take a feeding bottle to bed, with over 90 percent of the bottles filled with white milk or formula. However, more low-income children are drinking tap water each day – 63 percent under age six in 2015, up from 41 percent in 2014. And fewer are drinking fruit juice daily.

The most recent data on tooth decay among young children, from 2011 and 2012, found little change since 2004. Four of 10 kindergarteners and 55 percent of third graders had caries experience. And low-income children are most likely to have poor oral health and have experienced cavities. New data on tooth decay from the Colorado Department of Public Health and Environment are expected to be released in fall 2017.

