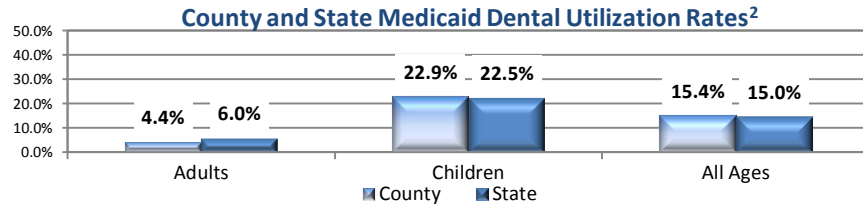


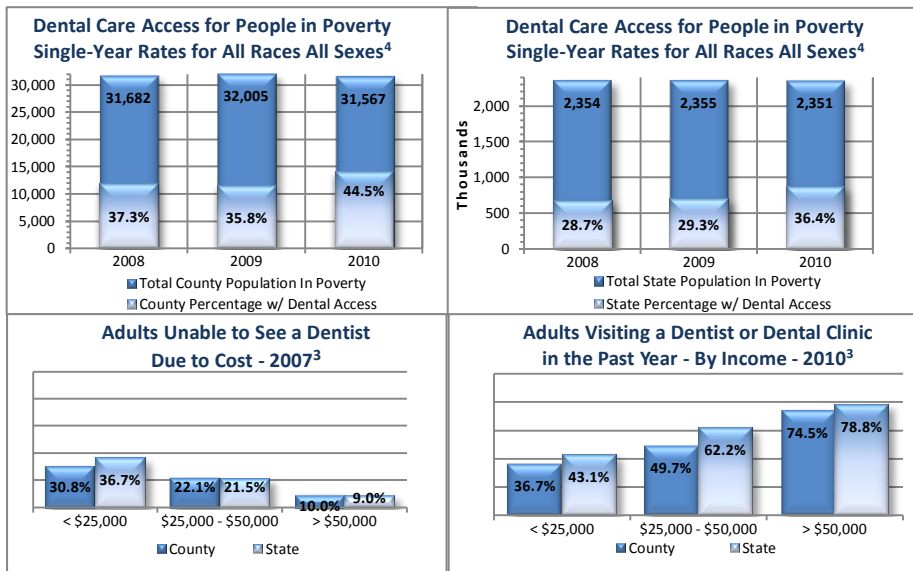
# ORAL HEALTH ACCESS PROFILE: OSCEOLA COUNTY

## A SIGNIFICANT PROPORTION OF RESIDENTS ARE UNABLE TO ACCESS ROUTINE DENTAL CARE

The number of Medicaid dental providers. Includes county health departments and federally qualified health centers <sup>1</sup>	14 (790 statewide)
The number of Medicaid-eligible adults compared to the number receiving Medicaid dental services <sup>2</sup>	31,193      1,387
The number of Medicaid-eligible children compared to the number receiving Medicaid dental services <sup>2</sup>	45,201      10,361



## Adult Oral Health Behavior and Access<sup>3</sup>



## Primary Oral Health Challenges

- 🔔 A significant proportion of county residents are unable to access routine dental care.
- 🔔 The county has not yet maximized access to evidence-based preventive services such as community water fluoridation and clinical preventive services such as dental sealants and topically applied fluorides. Currently, 84 percent of county residents on community water systems receive fluoridated water.<sup>4</sup>
- 🔔 The only dental care option for many is the hospital emergency room.
- 🔔 Despite a 2011 increase, Medicaid reimbursement rates remain too low for a private-practice dentist to offset the cost of care.

*IN 2010, 1,713 OSCEOLA COUNTY RESIDENTS SOUGHT EMERGENCY - ROOM TREATMENT FOR DENTAL CONDITIONS TYPICALLY CONSIDERED AVOIDABLE WITH APPROPRIATE PREVENTIVE AND RESTORATIVE CARE, INCURRING TOTAL CHARGES OF \$1,680,097. OF THAT TOTAL, \$598,514 WAS PAID BY FLORIDA MEDICAID.<sup>5</sup>*

## Policy Solutions

1. Increase Medicaid reimbursement rates & expand coverage to include adult preventive and restorative care.  
**Benefit: Cost increases in expanding dental care would be offset by reduced emergency room spending.<sup>6</sup>**
2. Grant Florida Agency for Health Care Administration (AHCA) express authority to reimburse health access settings for dental hygiene services, which is needed to fully implement legislation passed in 2011.  
**Benefit: Increase access and reduce cost of preventive dental services.**
3. Expand fluoridation of community water supplies and oppose efforts to remove fluoride from the water supply.  
**Benefit: Overwhelming scientific evidence supports community water fluoridation as safe and effective in preventing tooth decay and pays for itself in reduced dental care costs.<sup>7</sup>**

<sup>1</sup> Medicaid Bureau of Program Analysis, April 30, 2012

<sup>2</sup> Florida Agency for Healthcare Administration, Medicaid Decision-Support System, accessed June 2, 2011. (Note: Reporting of encounter data is incomplete. This may result in under-reporting of utilization in the Medicaid reform counties (Baker, Broward, Clay, Duval, and Nassau) and in Miami-Dade County.)

<sup>3</sup> Florida Behavior Risk Factor Survey, generated via FloridaCHARTS, May 4, 2012.

<sup>4</sup> Florida Department of Health, Public Health Dental Program, generated via FloridaCHARTS, May 4, 2012.

<sup>5</sup> Florida Agency for Healthcare Administration, Emergency Department Database, 2010.

<sup>6</sup> Shortridge EF, Moore JR. Use of emergency departments for conditions related to poor oral healthcare: Implications for rural and low-resource urban areas for three states. J Public Health Manag Pract 2009; 15(3): 238-245.

<sup>7</sup> Griffin SO, Jones K, Tomar SL. An economic evaluation of community water fluoridation. J Public Health Dent 2001; 61(2): 78-86.