The Oral Health of Ohioans—Are We Getting the Job Done?

Oral Health 2024 Symposium

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Objectives

- Describe the current oral health status of Ohio's schoolchildren and adults.
- Compare the current oral health of Ohioans to five years ago.
- Describe factors that impact the oral health status of Ohioans and their access to dental care.



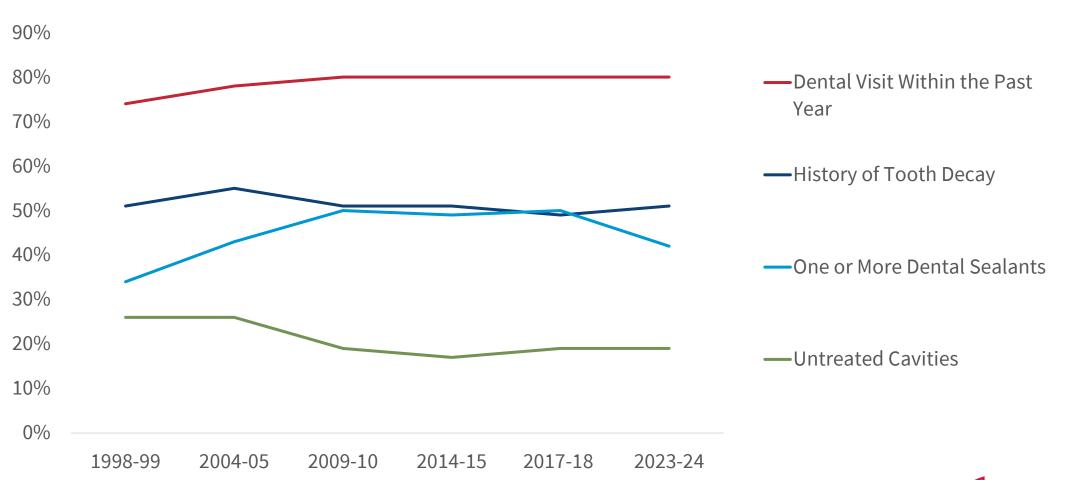
Oral Health Status of Children



- History of tooth decay.
- Untreated cavities.
- Dental sealants.
- Dental visit within the past year.



Trends in Oral Health Status Among Ohio 3rd Grade Schoolchildren, 1998-2024





History of Tooth Decay, 2023-2024

One in two third-grade schoolchildren had a history of tooth decay.



Schoolchildren who are significantly more likely to have a history of tooth decay compared to their counterparts are:

- Enrolled in Medicaid.
- Come from lower-income families.
- Consume more servings of sugar-sweetened beverages per day.
- Hispanic.



Untreated Tooth Decay, 2023-2024

One in five third-grade schoolchildren had untreated tooth decay.



Schoolchildren who

- Did not have a dental visit within the last year.
- Lack dental sealants.
- Are enrolled in Medicaid or self-pay for dental bills.
- Come from lower-income families.
- Are Hispanic.

are about **twice** as likely to have untreated tooth decay compared to their counterparts.



Prevalence of Dental Sealants, 2023-2024

Overall, **42%** of third-grade children had dental sealants on one or more permanent molars.



Schoolchildren who

- Didn't have a dental visit within the last year.
- Face challenges in accessing needed dental care.
- Are uninsured.

were significantly less likely to receive dental sealants compared to their counterparts.



Dental Visit Within the Last Year, 2023-2024

One in five third-grade schoolchildren didn't have a dental visit within the last year.

Children without a dental visit within the last year were more likely to be:

- Black or African American, or of another race, or Hispanic of any race.
- Those with reportedly fair/poor oral health.
- Those who reportedly had trouble accessing necessary dental care.
- Those who **self-pay** for dental bills or are on **Medicaid**.

The most common reasons for not visiting the dentist were: **Cost, dental office not open at convenient times, insurance did not cover procedures, could not take time off work, and dental office was too far away.**



Parent/Guardian Rating of Child's Oral Health, 2023-2024

One in four third-grade schoolchildren were rated by their parent/guardian as having fair/poor oral health rather than very good/good oral health.

Schoolchildren who

- Didn't have a dental visit within the last year.
- Had trouble accessing necessary dental care.

were **three times** as likely to be rated as having fair/poor oral health compared to their counterparts.



Oral Health Status of Adults



- Dental insurance coverage.
- Self-reported rating of oral health.
- Complete tooth loss.
- Unmet dental needs.
- Dental visit within the past year.
- Oral health of pregnant women.

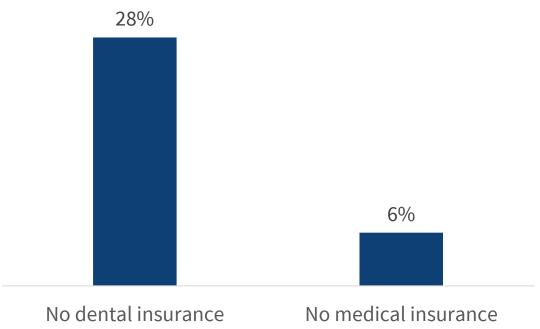


Dental Insurance Coverage, 2021

The percentage of adults reportedly without dental insurance was

4.6x higher than the percentage without medical insurance.

Percent of Respondents Who Reported Not Having Dental insurance vs. Medical insurance

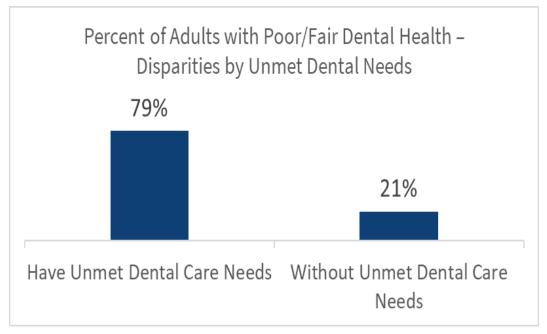




Self-Reported Rating of Oral Health, 2021

One in three adults rated their dental health as poor/fair rather than excellent/very good/good.

Those who needed dental care were far more likely to rate their dental health as poor/fair.



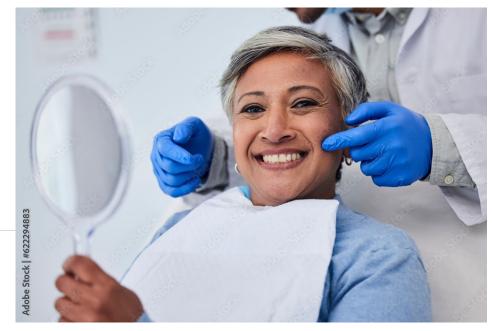


Complete Tooth Loss in Older Adults, 2018-2022 — Overall Findings

One in seven adults aged 65 years or older had all their teeth extracted due to tooth decay or gum disease.

Percent of Adults Aged 65+ Who Had All Their Natural Teeth Extracted

17%	16%		16%
2018	2020	I	2022



Source: Adobe Stock Images.

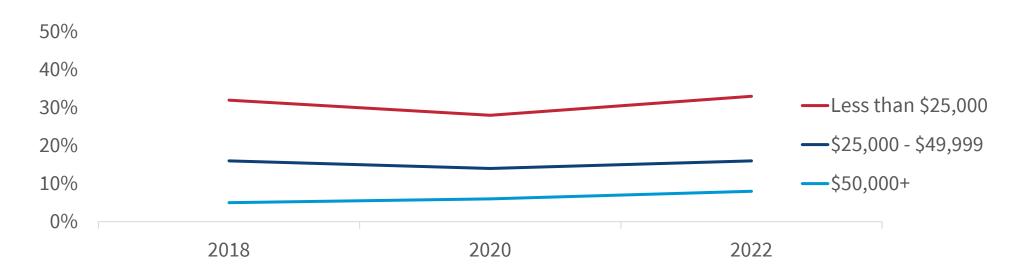


Data Source: Behavioral Risk Factor Surveillance System (BRFSS)

Complete Tooth Loss in Older Adults, 2018-2022 — Disparities by Income

Adults aged 65+ with a household income less than \$25,000 were:

- 2x as likely to lose all their teeth compared to those with an income of \$25,000 to \$49,999.
- 4x as likely to lose all their teeth compared to those with an income of \$50,000 or more.



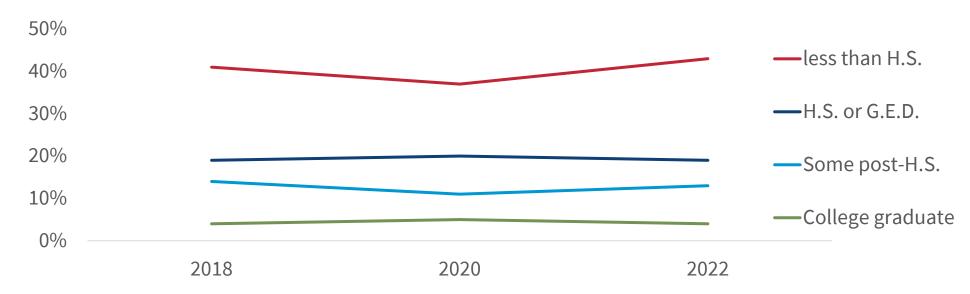


Data Source: <u>Behavioral Risk Factor Surveillance System (BRFSS)</u>

Complete Tooth Loss in Older Adults, 2018-2022 — Disparities by Education

Adults aged 65+ with **less than High School degree** were:

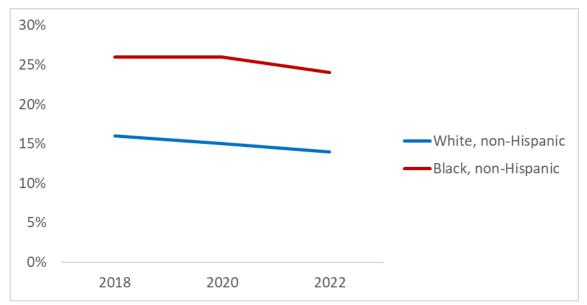
- **2x** as likely to lose all their teeth compared to those with a High School (H.S.) or General Educational Development (G.E.D.) degree.
- 12x as likely to lose all their teeth compared to those with a college degree.





Complete Tooth Loss in Older Adults, 2018-2022 — Disparities by Race/Ethnicity

People who self-identified as Black/Non-Hispanic aged 65+ were **1.7x** as likely to lose all their teeth compared to Non-Hispanic White individuals.

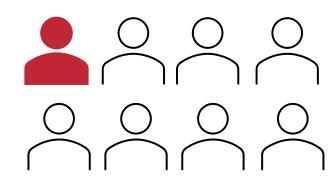




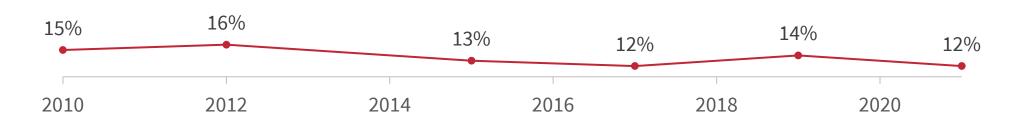
Data Source: Behavioral Risk Factor Surveillance System (BRFSS)

Unmet Dental Needs, 2010-2021 —Overall Findings

One in eight adults aged 18+ reported they had unmet dental health care needs in 2021.



Percent of Adults with Unmet Dental Health Care Needs





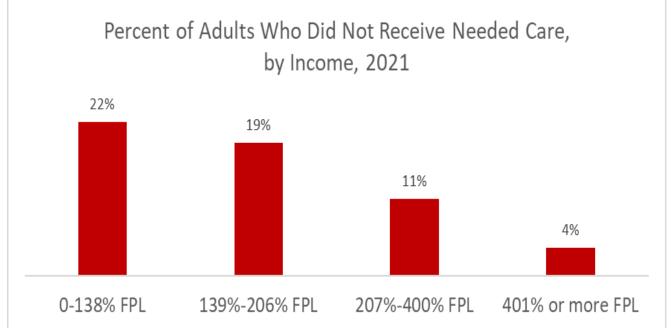
Unmet Dental Needs, 2021 — Disparities by Income

Adults with an income between 0% and 138% of the Federal Poverty Level (FPL) are

• 2x as likely to have unmet dental care needs compared to those with a household income of 207%-400% FPL.

• 5.5x as likely to have unmet dental care needs compared to those with a household

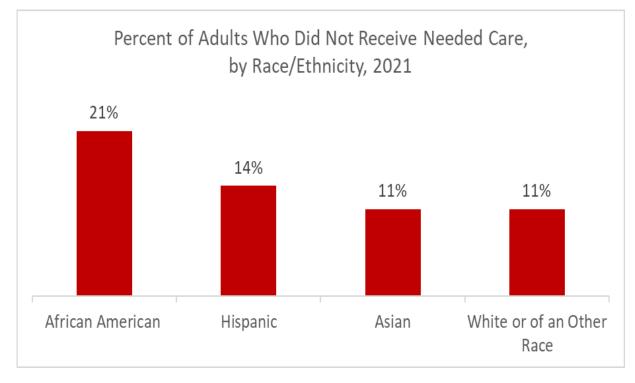
income of 401% or more FPL.





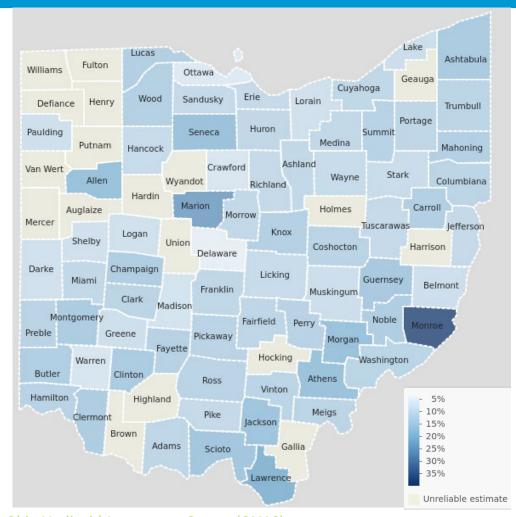
Unmet Dental Needs, 2021 — Disparities by Race/Ethnicity

African American adults are **2x** as likely to have unmet dental care needs compared to Asians, Whites, and persons of other races.





Unmet Dental Needs, 2021 — Geographic Disparities



Counties with the Highest Percentage of Persons Reporting Unmet Dental Needs:

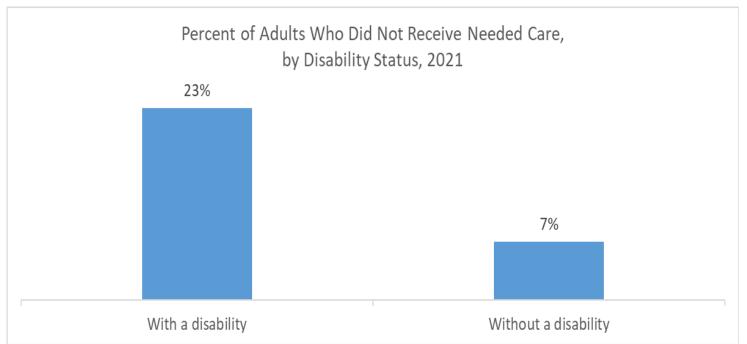
- 1. Monroe (55%)
- 2. Marion (36%)
- 3. Lawrence (31%)

In Ohio, 12% of adults aged 18+ reported they had unmet dental needs.



Unmet Dental Needs, 2021 — Disparities by Disabilities Status

Adults with a disability are **3x** as likely to have unmet dental care needs compared to those without a disability.





Dental Visit Within the Past Year, 2022

In 2022, **65%** of adults reported visiting a dentist or dental clinic within the past year. This proportion has remained stable since 2018.

Adults without a dental visit within the last year are more likely to be:

- Those with an annual income of less than \$15,000.
- Those with less than a High School degree.
- Black or multiracial.

(Note: The prevalence of dental visits among **American Indian or Alaskan Native** populations has significantly declined over the last six years, dropping from 76% in 2018 to 45% in 2022.)

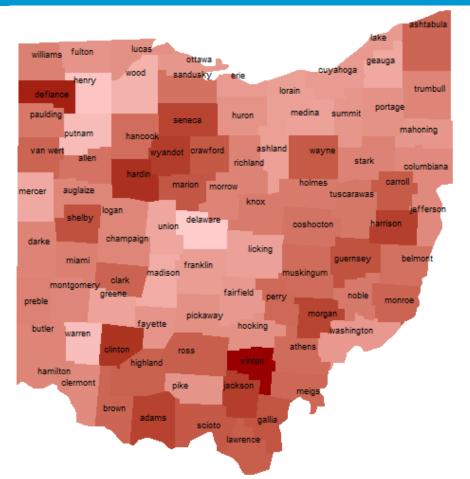


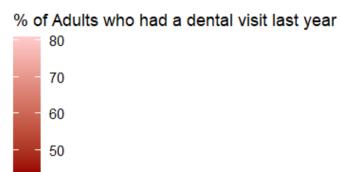
Dental Visit Within the Past Year, 2021 – Geographic Disparities

Counties with the lowest percentage of adults reporting a dental visit in the past year:

- 1. Adams (53%)
- 2. Morgan (53%)
- 3. Seneca (53%
- 4. Harrison (52%)
- 5. Jackson (52%)
- 6. Wyandot (52%)
- 7. Clinton (50%)
- 8. Hardin (49%)
- 9. Defiance (47%)
- 10. Vinton (44%)

All Ohio (65%)







Oral Health of Pregnant Women, 2021

17% of pregnant women reported unmet dental needs within the past year.¹

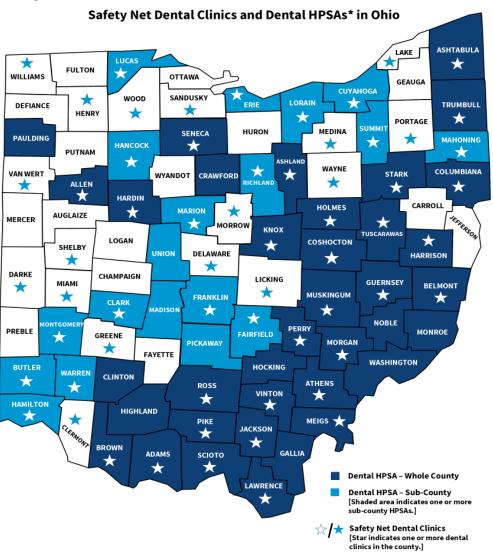
30% of pregnant women rated their oral health as fair/poor, rather than excellent/very good/good.¹

42% of pregnant women did not have a visit for teeth cleaning.²









^{*}A dental HPSA (health professional shortage area) is a federally designated geographic area, population or facility with a shortage of primary dental health care providers.

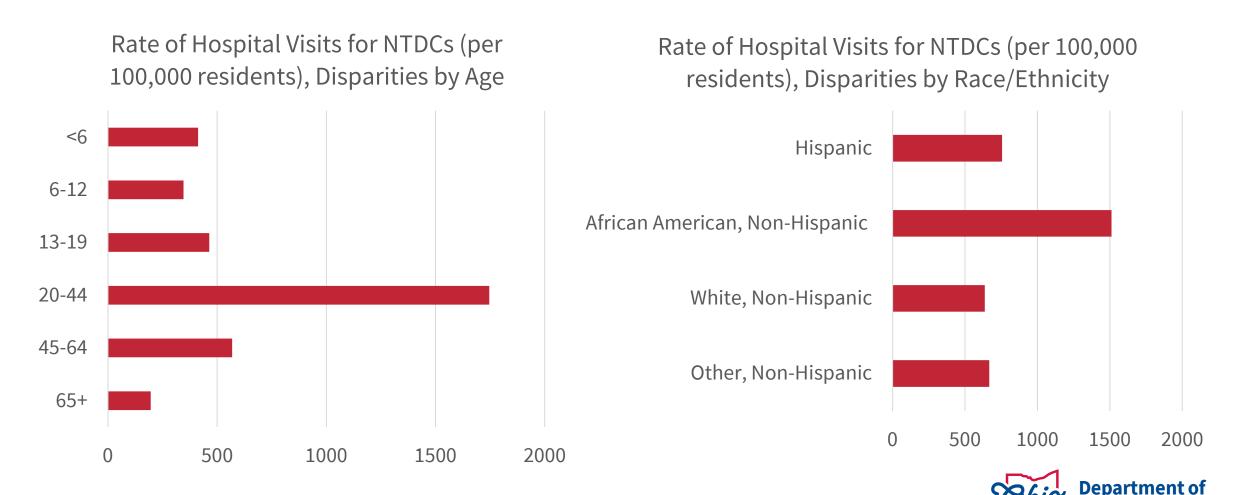


Emergency Department Visits for Non-Traumatic Dental Conditions (NTDCs), 2016-2019

- **391,223 hospital visits** with a primary diagnosis of a NTDC, for an overall rate of 838 hospital visits per 100,000 Ohio residents.
- **85%** of these visits were for oral health problems that can typically be addressed in a dental office/clinic.
- **54%** of all NTDC-related hospital visits were by **Medicaid-insured** patients; followed by persons who were uninsured (18%).
- Estimated costs of these visits is \$738 million.

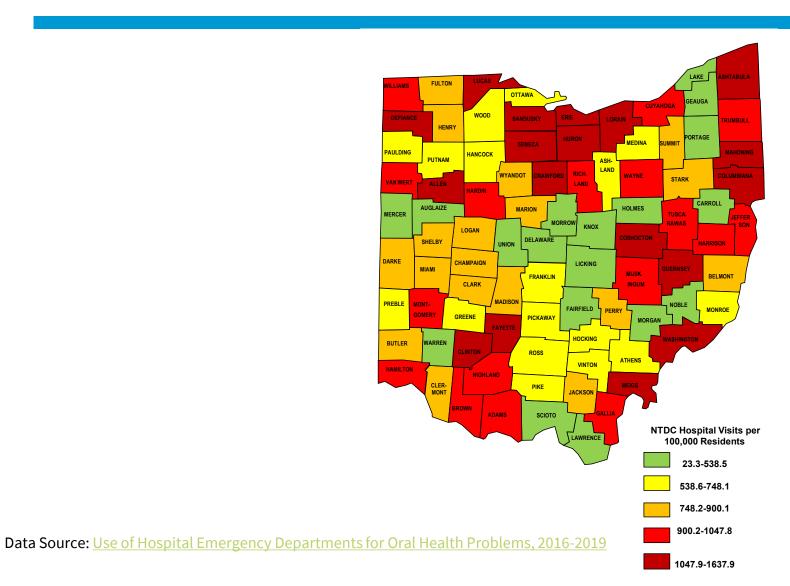


Emergency Department Visits for NTDCs, 2016-2019 (continued)



Data Source: Use of Hospital Emergency Departments for Oral Health Problems, 2016-2019

Rates of Emergency Department Visits by County, 2016-19





Are We Getting the Job Done?

- Disparities continue to exist.
- What's behind the observational data?
- Access to care remains limited.
- Strategies that show promise:
 - Integration of oral health into primary care/chronic disease management.
 - Expansion of school-based/linked oral health services.
 - Changes in Medicaid.



QUESTIONS?

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https://odh.ohio.gov/know-our-programs/oral-healthprogram/welcome





Department of Health