



Oral Health and Access to Dental Care for Ohioans, 2010

Dental Care Remains Top Unmet Health Care Need for Children and Low-income Adults

Oral diseases such as tooth decay and gum infections still affect a large proportion of Ohioans. Unnecessary dental disease and oral infections are costly problems for families, employers and government. Severe dental problems can result in poor performance or absence from school or work. Oral disease has been associated with other serious health problems including heart and lung diseases, stroke, diabetes, low birth weight and premature births.

Access to dental care means that people can get the dental care they need when they want it. To get that care, a person must have two things: availability of a private dental office or safety net clinic (operated by local governments, hospitals and community agencies) and a means to pay for the care. Lacking such means is the most common barrier to accessing dental care. Low-income families who rely on Medicaid to pay for dental care face a special barrier because their means of payment is not accepted by most dental offices.

This summary highlights findings from four recent surveys: the 2008 Ohio Family Health Survey, the 2006 Behavioral Risk Factor Survey and the Ohio Head Start (2002-2003) and Ohio Sentinel Third Grade (2007-2008) oral health surveys.

THE BOTTOM LINE

Uninsured: While approximately 1.3 million (13 percent) Ohioans have no health insurance, 4 million (39 percent) lack dental coverage.

Children's Oral Health: Ohio falls short of national objectives for children's oral health. The proportion of third grade children with untreated cavities was unchanged between 1998-99 and 2004-05. Children living in low-income households, and those who are black or live in Appalachian counties are most likely to have untreated cavities and toothaches.

Children's Access to Dental Care: Dental care remains the No. 1 unmet health care need for Ohio children. Racial and ethnic minority children, those from low-income households and those without private dental insurance are less likely to have a recent dental visit than others, and more likely to have an unmet need for dental care.

Adults' Oral Health: Oral cancer and loss of teeth in adults are significant problems. Dental problems for those who are poor, non-white and/or reside in Appalachian counties remain a particular concern.

Adults' Access to Dental Care: Dental care and prescription drug needs (prior to the implementation of the Medicare drug benefit) are greater than other health needs for Ohio adults. Dental care remains the No. 1 unmet health care need for low-income Ohio adults. Racial and ethnic minority adults, those from low-income households and those without private dental insurance are less likely to have a recent dental visit than others.

[Data At-a-Glance →](#)

At-a-Glance: Oral Health and Access to Dental Care for Ohioans, 2010

<p>Children (0–17 years)</p>	<p>Oral Health:</p> <ul style="list-style-type: none"> • Cavities: Twenty-three percent of children in third grade and 28 percent of 3–5-year-old Head Start children have untreated cavities. • Toothaches: 13 percent of children have had a recent toothache. • Disparities: Disease rates are significantly higher among children from low-income families and those from Appalachia. <p>Access to Care:</p> <ul style="list-style-type: none"> • Dental care is the No. 1 unmet health care need for children. • Disparities: The children most likely to have untreated cavities are poor, non-white, and/or reside in Appalachian counties. • Uninsured: 17 percent of Ohio children (about 470,000) are uninsured for dental care. • Medicaid: Only 12 percent of Ohio Medicaid consumers under age 3, and 42 percent of those ages 3–18 years had a dental visit in 2008.
<p>Adults</p>	<p>Oral Health:</p> <ul style="list-style-type: none"> • Loss of Teeth: In 2004, 49 percent of adults had at least one tooth removed due to tooth decay or gum disease (increased from 46 percent in 2004). <ul style="list-style-type: none"> ▪ Including 6 percent who had all of their teeth removed (versus 9 percent in 2000). <p>Access to Care:</p> <ul style="list-style-type: none"> • Dental care is the No. 1 unmet health care need for low-income adults and is second to prescription needs for adults overall. • Disparities: The adults most likely to have dental problems are poor, non-white and/or reside in Appalachian counties. • Uninsured: 47 percent of Ohio adults (about 3.5 million) are uninsured for dental care. <ul style="list-style-type: none"> ▪ 36 percent uninsured among adults aged 18–64 ▪ 60 percent uninsured among adults aged 65+ • Medicaid: Only 28 percent of Ohio Medicaid consumers ages 19 through 64 years, and 20 percent of those aged 65 and over had a dental visit in 2008.
<p>Ohio Infrastructure</p>	<ul style="list-style-type: none"> • Dentist Shortage Areas: Ohio has 56 federally designated dental health professional shortage areas (HPSAs), mostly due to inadequate numbers of dentists who serve low-income patients. There may be additional potential dentist shortage areas that have not applied for designation. • Safety Net: There are approximately 111 safety net dental clinics in Ohio (increased from 75 in 1999). • Medicaid Providers: 27 percent of Ohio dentists submitted at least one claim for a Medicaid patient in 2008. <ul style="list-style-type: none"> ▪ 17 percent of Ohio dentists treated at least 50 Medicaid consumers • Fluoridation: Approximately 92 percent of Ohioans on public water systems have access to fluoridated water.

