

# SUMMARY REPORT

## 2016 SYNOPSES OF STATE DENTAL PUBLIC HEALTH PROGRAMS

DATA FOR FY 2014-2015

Association of State and Territorial  
Dental Directors



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## Introduction

This report summarizes the results of the *2016 Synopses of State Dental Public Health Programs* (2016 Synopses); which represents the status of the state oral health program during the 2014-2015 fiscal year. Each January, the Association of State and Territorial Dental Directors (ASTDD) distributes the Synopses questionnaire to the 50 states, District of Columbia (DC) and U.S. territories. The purpose of the questionnaire is to obtain current information from each state/territory on demographic, infrastructure, workforce, and administrative factors that impact the state's oral health program. In addition, each state/territory is asked to provide detailed information on the services they provide to their constituents. State specific information from the 2016 Synopses is available in a comprehensive report posted on the member's only section of the ASTDD website ([www.astdd.org](http://www.astdd.org)). For 2016, no territories completed the survey, so only state and DC data are reported. The 2016 Synopses questionnaire was returned by 50 states plus the District of Columbia.

## DEMOGRAPHICS

Each age and income group has unique oral health needs. To plan a comprehensive program that serves all population groups, oral health program staff must understand the demographics of their state. The following tables present information on the number of states by the percent of their overall population that is 65 years or older or 5-19 years of age.

### Seniors – Percent of Population Aged 65 Years and Older (2014)

Percent of Population $\geq$ 65	Number of States	Percent of States
< 12.0%	7	13.7%
12.0 – 12.9%	7	13.7%
13.0 – 13.9%	13	25.5%
14.0 – 14.9%	16	31.4%
$\geq$ 15.0%	8	15.7%

Includes all states and the District of Columbia

Source: U.S. Census Bureau, <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

### Children – 0 to 17 Years (2014)

Percent of Population 0-17	Number of States	Percent of States
< 20.0%	2	3.9%
20.0 – 21.9%	13	25.5%
22.0 – 23.9%	24	47.1%
24.0 – 25.9%	11	21.6%
$\geq$ 26.0%	1	2.0%

Includes all states and the District of Columbia

Source: U.S. Census Bureau, <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

It is well documented that low-income individuals have more oral health problems compared to higher income individuals. The following tables present information by various measures of poverty. Title XIX Medicaid and the Children's Health Insurance Program (CHIP) provide medical and dental coverage to low-income children.

### Title XIX Medicaid Children (Number ever enrolled, FFY 2014)

Number of Children	Number of States	Percent of States
< 100,000	9	17.6%
100,000 – 249,999	6	11.8%
250,000 – 499,999	10	19.6%
500,000 – 749,999	14	27.5%
750,000 – 999,999	2	3.9%
$\geq$ 1,000,000	10	19.6%

Includes all states and the District of Columbia

Source: <https://www.medicaid.gov/chip/downloads/fy-2014-childrens-enrollment-report.pdf>

**CHIP Children (Number ever enrolled, FFY 2014)**

Number of Children	Number of States	Percent of States
< 10,000	6	11.8%
10,000 – 19,999	5	9.8%
20,000 – 39,999	4	7.8%
40,000 – 49,999	4	7.8%
50,000 – 99,999	9	17.6%
100,000 – 499,999	20	39.2%
≥ 500,000	3	5.9%

Includes all states and the District of Columbia

Source: <https://www.medicaid.gov/chip/downloads/fy-2014-childrens-enrollment-report.pdf>

The National School Lunch Program is a federally assisted meal program operating in public and nonprofit private schools and residential child care institutions. It provides nutritionally balanced, low-cost (reduced price) or free lunches to children each school day. The program was established in 1946 under the National School Lunch Act. To be eligible for free lunches a child's family must be at or below 130% of the Federal Poverty Level (FPL) while the upper income for reduced price lunches is 185% of FPL.

**Percent of Children Receiving Free or Reduced Price School Lunches (2013-2014)**

Percent of Children	Number of States	Percent of States
< 40.0%	12	23.5%
40.0 – 49.9%	19	37.3%
50.0 – 59.9%	10	19.6%
60.0 – 69.9%	6	11.8%
≥ 70%	2	3.9%
Not available*	2	3.9%

Source: U.S. Department of Education, National Center for Education Statistics, <https://nces.ed.gov/ccd/elsi/>

\* Arizona and West Virginia data for 2013-2014 did not meet minimum data quality standards

As previously mentioned, low-income individuals have more oral health problems compared to higher income individuals. The percent of children living in households at or below 125% and 200% of Federal Poverty Level (FPL) are common indicators used to describe the socioeconomic status of a state.

#### Children under 18 in families earning less than 125% of FPL (2014)

Percent of Children	Number of States	Percent of States
< 15.0%	2	3.9%
15.0 – 19.9%	11	21.6%
20.0 – 24.9%	15	29.4%
25.0 – 29.9%	7	13.7%
≥ 30.0%	16	31.4%

Includes all states and the District of Columbia

Source: U.S. Census, [https://www.census.gov/hhes/www/cpstables/032015/pov/pov46\\_001\\_125138.htm](https://www.census.gov/hhes/www/cpstables/032015/pov/pov46_001_125138.htm)

#### Children under 19 Years of Age who are at or below 200% of FPL (2014)

Percent of Children	Number of States	Percent of States
< 20.0%	0	0.0%
20.0 – 29.9%	1	2.0%
30.0 – 39.9%	20	39.2%
40.0 – 49.9%	22	43.1%
≥ 50.0%	8	15.7%

Includes all states and the District of Columbia

Source: U.S. Census, <http://www.census.gov/hhes/www/hlthins/data/incpovhlth/2014/acs-tables.html>

#### Children under 19 at or Below 200% FPL without Health Insurance (2013)

Percent of Children	Number of States	Percent of States
< 3.0%	3	5.9%
3.0 – 5.9%	12	23.5%
6.0 – 8.9%	20	39.2%
9.0 – 11.9%	10	19.6%
12.0 – 14.9%	5	9.8%
≥ 15.0%	1	2.0%

Includes all states and the District of Columbia

Source: U.S. Census, <http://www.census.gov/hhes/www/hlthins/data/incpovhlth/2013/acs-tables.html>

## STATE INFRASTRUCTURE

When planning community programs, it is essential that oral health program staff know and understand their state's infrastructure. Especially important to oral health is community water fluoridation and programs that provide restorative and preventive dental care to those who might not be able to access care through private dentists.

### Percent of Population Served by Community Water Fluoridation (2014)

Percent of Population	Number of States	Percent of States
< 25.0%	3	5.9%
25.0 – 49.9%	5	9.8%
50.0 – 74.9%	15	29.4%
≥ 75.0%	28	54.9%

Includes all states and the District of Columbia

Source: Centers for Disease Control and Prevention, <http://www.cdc.gov/fluoridation/statistics/2014stats.htm>

### Number of Community Based Dental Clinics for Low-Income Residents

Number of Clinics	Number of States	Percent of States
< 10	3	5.9%
10 – 24	9	17.6%
25 – 49	11	21.6%
50 – 99	12	23.5%
≥ 100	12	23.5%
Not Reported	4	7.8%

Includes all states and the District of Columbia

Source: State Synopses Questionnaire

### Number of Local Health Departments with Restorative Dental Services

Number of Health Departments	Number of States	Percent of States
0	19	37.3%
1 – 4	16	31.4%
5 – 9	7	13.7%
10 – 49	5	9.8%
≥ 50	2	3.9%
Not Reported	2	3.9%

Includes all states and the District of Columbia

Source: State Synopses Questionnaire

### Number of Local Health Departments with Education and Preventive Oral Health Programs

Number of Health Departments	Education Only		Preventive Services (such as sealants or fluoride)	
	# of States	% of States	# of States	% of States
0	25	49.0%	24	47.1%
1 – 4	11	21.6%	7	13.7%
5 – 9	3	5.9%	6	11.8%
10 – 49	9	17.6%	10	19.6%
≥ 50	1	2.0%	2	3.9%
Not Reported	2	3.9%	2	3.9%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

### Number of Mobile Dental Clinics with Restorative Dental Services

Number of Mobile Clinics	Number of States	Percent of States
0	28	54.9%
1 – 4	19	37.3%
≥ 5	3	5.9%
Not Reported	1	2.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

### Number of Mobile Dental Clinics with Preventive Dental Services

Number of Mobile Clinics	Number of States	Percent of States
0	32	62.7%
1 – 4	9	17.6%
≥ 5	9	17.6%
Not Reported	1	2.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

One of the Healthy People 2020 oral health objectives (OH-17.1) is to “increase the proportion of States (including the District of Columbia) and local health agencies that serve jurisdictions of 250,000 or more persons with a dental public health program directed by a dental professional with public health training”. The following two tables provide information on the percent of large state/local health jurisdictions with a dental program and the percent of those programs that are managed by a dental professional with public health training.

**Percent of State & Local Health Jurisdictions with a Population  $\geq$  250,000 with a Dental Program**

Percent of Jurisdictions	Number of States	Percent of States
< 25.0%	2	3.9%
25.0 – 49.9%	9	17.6%
50.0 – 74.9%	10	19.6%
$\geq$ 75.0%	26	51.0%
Not Reported or Not Applicable	4	7.8%
Total Number of Health Jurisdictions with a Dental Program (total for all reporting States and DC)		142

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**Percent of State & Local Dental Health Programs Managed by a DPH Professional**

Percent of Programs	Number of States	Percent of States
0.0%	23	45.1%
1.0 – 24.9%	4	7.8%
25.0 – 49.9%	6	11.8%
50.0 – 74.9%	5	9.8%
$\geq$ 75.0%	9	17.6%
Not Reported or Not Applicable	4	7.8%
Number of Health Jurisdictions with a Dental Program Managed by a DPH Professional (total for all reporting States and DC)		32

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

States are not mandated to provide dental benefits to adults through Medicaid. The following table lists the percent of states that provide dental benefits to adults who are eligible for Medicaid.

#### Percent of States with Medicaid Adult Dental Benefits

Type of Benefit	Medicaid Adult Benefits	Medicaid Benefits for Pregnant Women
None	9.8%	27.5%
Emergency Only	23.5%	2.0%
Limited	31.4%	21.6%
Comprehensive	35.3%	47.1%
Not Reported	0.0%	2.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

The Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program is the child health component of Medicaid. It's required in every state and is designed to improve the health of low-income children by financing appropriate and necessary pediatric services. Each state develops EPSDT guidance; the following table lists recommended age at first dental visit from the state guidance.

#### EPSDT Age for First Dental Visit

Age in Years	Number of States	Percent of States
1 Year or younger*	46	90.2%
1.5 – 2 Years	2	3.9%
3 Years	0	0.0%
As needed	0	0.0%
Not Reported	3	5.9%

\* Includes states with guidance that recommends a dental visit at eruption of first tooth  
Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

## DENTAL WORKFORCE

Dentist-to-population and hygienist-to-population ratios are commonly used indicators of dental workforce and access to dental professionals. The following two tables provide information on the dentist and hygienist to population ratios. Please note that these ratios are based on the number of dental professionals living in the state rather than those licensed to practice in the state.

### Dentists Living in State to Population Ratio

Dentist to Population Ratio	Number of States	Percent of States
< 1,500	14	27.5%
1,500 – 1,999	22	43.1%
2,000 – 2,499	9	17.6%
≥ 2,500	0	0.0%
Not Reported	6	11.8%

Includes all states and the District of Columbia

Source: State Synopses Questionnaire

### Dental Hygienists Living in State to Population Ratio

RDH to Population Ratio	Number of States	Percent of States
< 1,500	20	39.2%
1,500 – 1,999	18	35.3%
2,000 – 2,499	6	11.8%
≥ 2,500	0	0.0%
Not Reported	7	13.7%

Includes all states and the District of Columbia

Source: State Synopses Questionnaire

It is well documented that many states have a geographic shortage or mal-distribution of dental professionals. The following table provides information on the percent of counties in a state that do not have a dentist.

### Percent of Counties in State with no Dentist

Percent of Counties	Number of States	Percent of States
0%	16	31.4%
1.0 – 4.9%	16	31.4%
5.0 – 9.9%	7	13.7%
≥ 10%	8	15.7%
Not Reported / Not Applicable	4	7.8%

Includes all states and the District of Columbia (Note: AK and DC do not have counties)

## ADMINISTRATION

The following tables provide information on the administration, staffing and budgeting of state oral health programs. Please note that some states operate or hire staff for local or regional dental clinics so some of the staff identified in these tables may be clinical.

### Dental Director's Years of Service

Years of Service	Number of States	Percent of States
< 1 year	10	19.6%
1 – 4 years	20	39.2%
5 – 9 years	11	21.6%
10 – 14 years	4	7.8%
≥ 15 years	3	5.9%
Not Reported / Vacant	3	5.9%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

### Dental Director is Full-Time Position

Full-Time Position	Number of States	Percent of States
No	3	5.9%
Yes	46	90.2%
Not Reported / Vacant	2	3.9%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

### Percent of Dental Director's Time Devoted to Medicaid/SCHIP Issues

Percent of Time	Number of States	Percent of States
0	12	23.5%
1.0 – 9.9%	13	25.5%
10.0 – 19.9%	12	23.5%
20.0 – 29.9%	5	9.8%
≥ 30%	7	13.7%
Not Reported	2	3.9%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**Percent of Dental Director's Time Paid by Medicaid/SCHIP**

Percent of Time	Number of States	Percent of States
0	44	86.3%
10 – 49%	2	3.9%
50 – 100%	2	3.9%
Not Reported	3	5.9%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**Number of FTE Employees Working in State Programs (Rounded)**

Number of FTEs	Number of States	Percent of States
< 2	7	13.7%
2 – 3	17	33.3%
4 – 5	7	13.7%
6 – 8	6	11.8%
9 – 10	6	11.8%
11 – 20	4	7.8%
> 20	3	5.9%
Not Reported	1	2.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**Number of FTE Contractors Funded by State Program (Rounded)**

Number of FTEs	Number of States	Percent of States
< 2	31	60.8%
2 – 3	6	11.8%
4 – 5	2	3.9%
6 – 10	4	7.8%
11 – 20	4	7.8%
21 – 183	3	5.9%
Not Reported	1	2.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**Number of FTE Employees and Contractors Working for or Funded by State**

Number of FTEs	Number of States	Percent of States
1 – 2	8	15.7%
3 – 4	12	23.5%
5 – 6	6	11.8%
7 – 9	7	13.7%
10 – 19	10	19.6%
20 – 49	5	9.8%
≥ 50	2	3.9%
Not Reported	1	2.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**Funding Sources – Percent of Budget from Each Source (Rounded)**

% of Budget from Source	Funding Source (Percent of States)					
	Medicaid	Other State	MCHBG	Other HRSA	CDC	Other
0	84.3%	35.3%	35.3%	51.0%	43.1%	60.8%
1 – 24%	7.8%	21.6%	31.4%	25.5%	23.5%	27.5%
25 – 49%	5.9%	15.7%	11.8%	11.8%	25.5%	7.8%
50 – 74%	2.0%	13.7%	11.8%	9.8%	3.9%	3.9%
75 – 100%	0.0%	13.7%	9.8%	2.0%	3.9%	0.0%
Not Reported	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**NOTE: Of the 51 states that provided information on source of funding, 16 (31%) reported receiving 75-100% of their funding from just one of the sources listed in the preceding table (Medicaid, Other State, HRSA, CDC, Other). Seven states (14%) received ≥ 75% of their funding from non-Medicaid state funds while 7 states (14%), 2 states (4%) and 0 states (0%) reported receiving ≥ 75% of their funding from HRSA (MCHBG plus other HRSA funds), CDC or other public/private respectively.**

**Overall Budget Change as Compared to Prior Year**

Change in Overall Budget	Number of States	Percent of States
Decreased	13	25.5%
Increased	24	47.1%
Same	13	25.5%
Not Reported	1	2.0%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire

**Number (%) of States that Reported a Decrease or Increase in Funding Source**

Funding Source	Decreased	Increased	Same	TOTAL REPORTING
State – Medicaid	3 37.5%	3 37.5%	2 25.0%	8
State – Other	5 16.1%	10 32.3%	16 51.6%	31
HRSA – MCHBG	9 25.7%	11 31.4%	15 42.9%	35
HRSA – OHWA	6 24.0%	7 28.0%	12 48.0%	25
CDC – PHHSBG	1 5.9%	10 58.8%	6 35.3%	17
CDC – Infrastructure	2 10.5%	6 31.6%	11 57.9%	19

Source: State Synopses Questionnaire

**Budget Range – Number of States within Each Budget Category**

Budget Category	Number of States	Percent of States
Less than \$100,000	0	0.0%
\$100,000 to \$250,000	1	2.0%
\$250,001 to \$500,000	5	9.8%
\$500,001 to \$999,999	14	27.5%
\$ 1 million or more	25	49.0%
Not Reported	6	11.8%

Source: State Synopses Questionnaire

Range: \$183,377 to \$5,878,386

Mean (for reporting states): \$1,729,770  
 Median (for reporting states): \$1,055,668

## ORAL HEALTH PROGRAMS

State oral health programs offer a variety of different services to their constituents. The following table provides information on the percent of states that offer specific oral health services.

### Percent of States with Specific Oral Health Services

Program	Has Program	No Program	Not Reported
Abuse/Neglect or PANDA Program	13.7%	82.4%	3.9%
Access to Care Program	51.0%	45.1%	3.9%
Dental Screening Program	66.7%	29.4%	3.9%
Dental Sealant Program	74.5%	25.5%	0.0%
ECC Prevention Program	45.1%	51.0%	3.9%
Fluoride Mouthrinse Program	37.3%	60.8%	2.0%
Fluoride Supplement Program	17.6%	78.4%	3.9%
Fluoride Varnish Program	74.5%	23.5%	2.0%
Mouthguard/Injury Prevention Program	13.7%	82.4%	3.9%
Oral Health Education and Promotion	76.5%	21.6%	2.0%
Oral Health (Open Mouth) Surveys			
Head Start	29.4%	70.6%	0.0%
Kindergarten	25.5%	74.5%	0.0%
3 <sup>rd</sup> Grade	62.7%	37.3%	0.0%
Older Adults	15.7%	84.3%	0.0%
Programs for Adolescents	13.7%	82.4%	3.9%
Programs for Pregnant Women	37.3%	58.8%	3.9%
Programs for Older Adults	23.5%	70.6%	5.9%
Programs for Children Special Health Care Needs	37.3%	56.9%	5.9%
Craniofacial Recording System	78.4%	17.6%	3.9%
Craniofacial Referral System	72.5%	23.5%	3.9%

Includes all states and the District of Columbia  
Source: State Synopses Questionnaire