



# Carlisle Area Health & Wellness Foundation

Adopted: December 2004

Revised: April 2010

Developed by  
Public Policy Committee

## Public Policy Recommendations: Oral Health

### Local

- Encourage school districts to provide fluoride treatments to students in need of them.
- Urge local school districts to decrease students' access to drinks and foods that cause dental problems and increase oral health prevention education.
- Advocate that municipalities fluoridate their water supplies. To learn whether your community has fluoridated water, visit the Centers for Disease Control and Prevention's webpage ([www.cdc.gov](http://www.cdc.gov)) and click on their "My Water's Fluoride" interactive map.

### State

- Ensure oral health services and education for high-risk individuals, such as children, senior citizens, persons with physical or mental disabilities and persons who are underinsured or uninsured.
- Guide future oral health policies and programs by initiating data collection during required elementary school dental screenings.
- Enact legislation to increase the number of people served by publicly fluoridated water supplies.
- Support policies that decrease access to, and use of tobacco products particularly for persons under 18.
- Support taxation of all tobacco products (including smokeless tobacco).
- Support oral health efforts spearheaded by Pennsylvania's Department of Health and the Pennsylvania Coalition for Oral Health (PCOH).

### Federal

- Broaden insurance coverage for children and adults, persons on Medicaid, older Americans, and special populations.
- Invest in the training of a more diverse dental workforce through scholarships and loan repayment programs.

### Oral Health in Our Region

The Pew Center on the States 2010 report, *The Cost of Delay: State Dental Policies Fail One in Five Children*, gives dental healthcare in Pennsylvania an F. Pennsylvania's failing grade is based on the state's poor performance on six policy benchmarks: 1) the lack of statewide sealant programs located in high-risk schools; 2) the shortage of fluoridated water systems; 3) the low percentage of children on Medicaid who receive dental services (32% in 2007); 4) the state's low reimbursement rates for dentists serving Medicaid enrolled children; 5) the lack of a state Medicaid program that reimburses medical providers for preventive dental health services<sup>1</sup> and; 6) the lack of new primary care dental providers who are authorized by the state. Pennsylvania performed successfully on just two policy benchmarks: the state submits basic screening data to the National Oral Health Surveillance System; and the state recently passed legislation allowing children to be seen by hygienists who work in public health settings.

The good news is that Pennsylvania can do far better. Public water fluoridation is the most cost-effective prevention strategy for oral health, but nearly half of all Pennsylvanians live in communities that do not provide fluoridated water. Although some municipalities in our region—including Carlisle—fluoridate their water, many children do not have access to fluoridated water or school-based fluoride programs (to learn more, visit: <http://apps.nccd.cdc.gov/MWF/Index.asp>).

Fluoride varnish applications and sealants are another inexpensive means of combating child tooth decay. Yet only one out of four children under the age of nine and less than one in ten low-income children of color receive dental sealants. For children living in rural areas that rely upon well water rather than municipal water systems, access to fluoride applications and fluoride supplement tablets or drops (available by prescription) is critical.

Medicaid is the primary reimbursement source for dental services for low-income individuals. In Pennsylvania and nationally, relatively few dentists accept Medicaid. To complicate matters, those dentists in the Medicaid program may or may not accept Medicaid clients at any given time. Some dentists offer free or reduced services for clients rather than apply for Medicaid reimbursement.

Navigating the dental marketplace to identify practices that accept Medicaid reimbursement or provide pro bono services can be time consuming. A new federal website ([www.insurekidsnow.gov](http://www.insurekidsnow.gov)) makes it easy to search for dentist serving your zip code who accept various public insurance options. Sadler Health Center Corporation is the only consistently available provider in our area.

<sup>1</sup> As of April 1 2010, Pennsylvania now meets this benchmark.

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## Background

Good oral health is integral to physical health and wellbeing. Dental health services, prevention and education can alleviate unnecessary pain, improve general health and reduce the long-term costs of expensive restorations and emergency care.

## Fast Facts about Oral Health

- Over 108 million Americans lack dental insurance—a figure that is more than double the number of individuals who lack medical insurance.
- Tooth decay is the most common chronic disease among children. Oral health problems affect children's ability to learn and focus in the classroom, and they can damage self-esteem, create difficulty eating and lead to costly emergency room care.
- Oral health problems disproportionately affect rural populations, low-income individuals, children, older Americans, people with disabilities, and racial and ethnic minorities. Complex Medicaid administrative procedures, dissatisfaction with provider reimbursement rates, and the lack of dental coverage through private insurance and Medicare contribute to the small number of dentists who serve low-income individuals.
- Almost 70 percent of adults between the ages of 35 and 44 have lost at least one permanent tooth, while 48 percent have gingivitis and 22 percent have destructive gum disease.
- Poor oral health is associated with coronary heart disease, perhaps due to the inflammation generated by oral infections.
- Tobacco use increases the risk of gum disease and oral and pharyngeal cancers. The death rate resulting from oral cancer is higher than that of cervical cancer, Hodgkin's disease, or skin cancer (malignant melanoma). Pennsylvania is presently the only state in the U.S. that fails to tax smokeless tobacco products.

## Program Recommendations

- Increase access to dentists and hygienists serving low income persons by maintaining Sadler Health Center Corporation's dental health program. Additionally, encourage local dentists to accept Medicaid reimbursement and/or provide free or low cost services to those unable to pay.
- Increase awareness of and screening for oral cancers by local dentists and increase office-based patient education about the risks of tobacco products.
- Encourage education efforts by providing information and training on oral hygiene, fluoride varnish, nutrition and tobacco prevention to local healthcare professionals, the Carlisle Regional Medical Center, and programs serving expectant mothers and parents of newborns.
- Educate parents and children about oral hygiene, tobacco prevention and cessation. The majority of oral health problems could be reduced or eliminated through improved policies and services that are designed to:
  - \* Decrease consumption of caffeinated and sugary beverages;
  - \* Ensure access to semiannual dental checkups; and
  - \* Eliminate use of tobacco products.
- Support a Community Hygienist to work with elementary school nurses to provide screenings and referrals, and to apply dental sealants.
- Identify and address oral health problems among elderly persons who are at-risk due to low-incomes, lack of understanding and lack of access to care. Educate staff of assisted living and nursing home facilities to recognize and respond to the oral healthcare needs of their residents.

## For more information, please contact:

Becca Raley, *Director of Grants & Public Policy*  
Carlisle Area Health & Wellness Foundation  
717.960.9009 x 4  
braley@cahwf.org

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