

Dental Provider Network Statistics – Geographic Access

HUSKY Health Population Access to Primary Care Dentist (as of August 2022)

**5
Miles**

98% of Population with Access to a Primary Care Dentist within 5 Miles

**10
Miles**

99% of Population with Access to a Primary Care Dentist within 10 Miles

**20
Miles**

99.9% of Population with Access to a Primary Care Dentist within 20 Miles

Commercial Plans Maximum Time & Distance Standards*

**10
Miles**

Metro Requirement
(Population 50K+)

**20
Miles**

Micro Requirement
(Population 10k-50k)

**30
Miles**

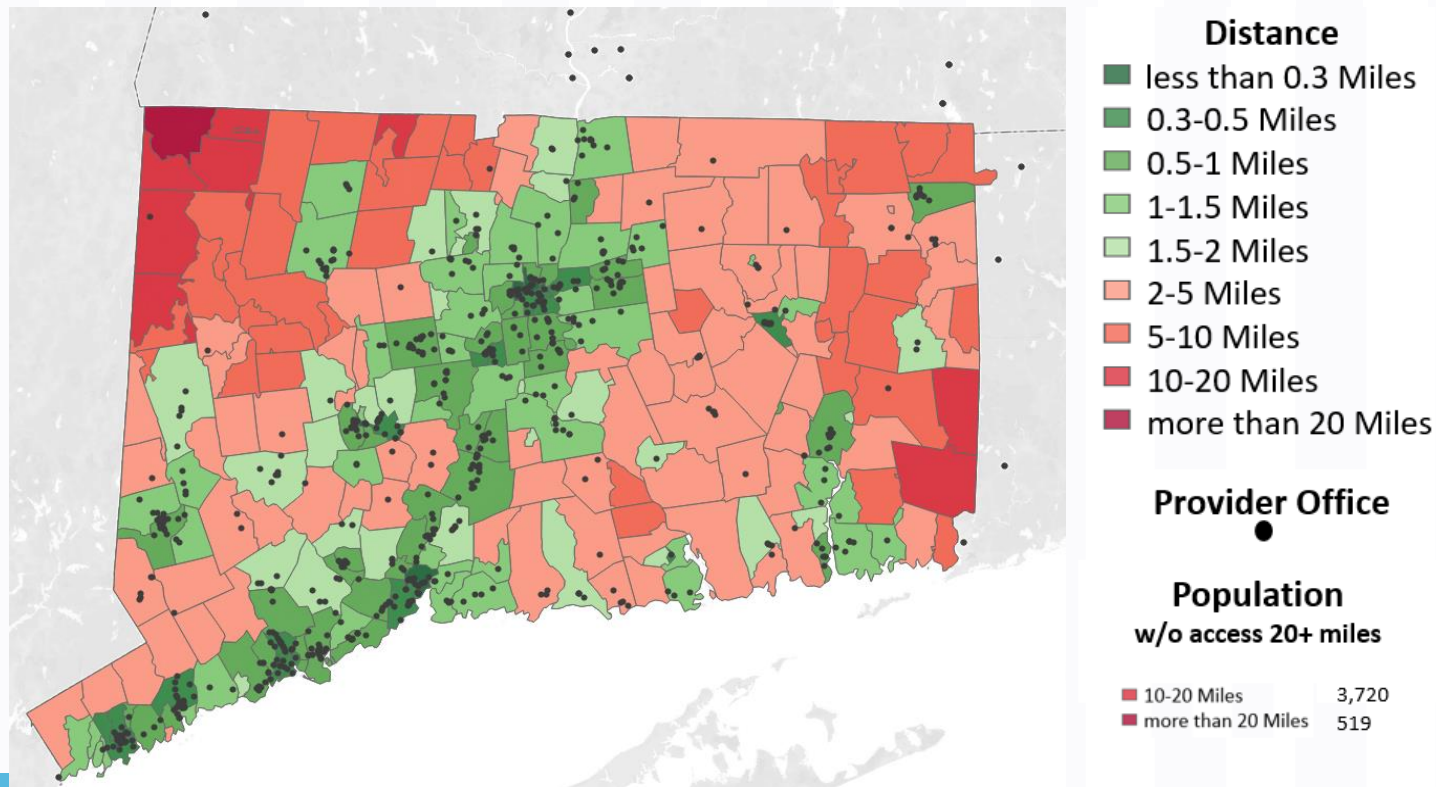
Rural Requirement
(Population Under 10k)

Primary Care Dentist = General Dentist or Pediatric Dentist

*Connecticut Insurance Department Network Adequacy for Commercial Plans Report and Survey

"We Care About Your Dental Health"

Status of the Dental Provider Network– Geographic Accessibility (Distance for Members to Primary Care Dentist by Zip Code)



73.46% of CT Dentists that participate in a dental network are in the CMAP Network
Nov 22

Dental Provider Network Statistics – Capacity

Patient Volume to Dentists

Standard Metric: 1 PCD : 2,500 Members and 1 Specialist : 4,000 Members

	Primary Care Dentists	Primary Care Dentist to Member	Specialists	Dental Specialist to Member
Statewide	1,803	1: 568	575	1:1,781
Fairfield	495	1:484	170	1:1,411
Hartford	542	1:523	179	1:1,583
Litchfield	49	1:910	13	1:3,433
Middlesex	70	1:465	19	1:1,714
New Haven	497	1:577	156	1:1,839
New London	76	1:981	26	1:2,869
Tolland	25	1:1,038	5	1:5,190
Windham	43	1:843	7	1:5,180

Dental Health Quality Metrics: Overview

What are dental quality measures?

There are only three metrics currently used for dentistry in the CMS CORE Measure Set reporting. The aim is to track improvements in the oral health of Members. **These are reported for children only.**

- Any Dental Service in the last year
- Any Preventive Services in the last year
- Any Treatment Services

What data powers them?

Unlike medicine or behavioral health, oral health **does not have diagnosis coding**. Claims data is used to measure desired outcomes and measures are solely based on utilization.

Who develops these measures?






HEDIS Quality Measures are being replaced by 2 measures that were developed by the American Dental Association Dental Quality Alliance. **The population being measured is stratified by age and tied to when it is appropriate to deliver specified services. The measures include fluoride applications and sealants for children.**

Quick overview of quality measures we'll review

Many of the quality measures used by CTDHP are self-developed and based on claims data such as the utilization of different types of services. As coding improves, we will collect that information on claims to better assess oral health status. Much of our evaluation evolves around population health metrics for our Members.

Member's Oral Health– Outcome and Quality Measure Challenges

Oral Health Measures that *Infer* Oral Health Status

Measure	Descriptor	Ideal Children Outcome		Ideal Adult Outcome
Preventive/Treatment Services	The ratio between preventive services to treatment services.		Higher Rates of Prevention than Treatment Services	
Non-Utilization	How many members are not going to the dentist.		Lower Rates of Non-Utilization	
Fluoride Varnish & Dental Sealant Rates	Specific preventive treatments for children to prevent tooth decay.		High Rates of Treatment	Not Currently Available
Caries Risk Assessment Scores	Assessment of the risk for tooth decay.	 	High Rates of Total Assessment Completed Low Rates of "High Risk" Scores	Not Currently Available

Members' Oral Health – Dental Services for Children



Higher Prevention
Rates than Treatment Rates

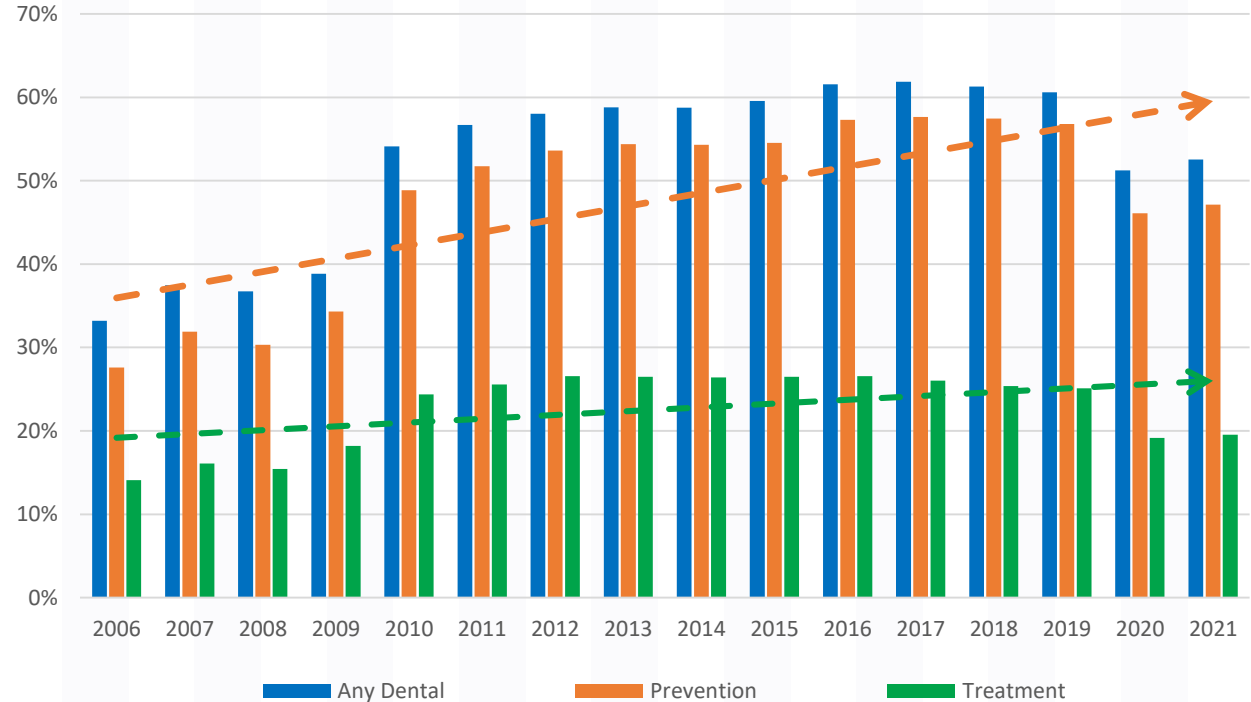
Ranked 2nd Nationally for
overall utilization rate at
53% in 2020.

Ranked 3rd Nationally in
prevention rate (49.8%) in
2020, dropping from 2nd in
2019.



180,467 out of
407,537 children did not
utilize any dental services in
2021.

Dental Services for Children
CMS-416 Measurements by FFY (ever-enrolled population, 12a/1a)



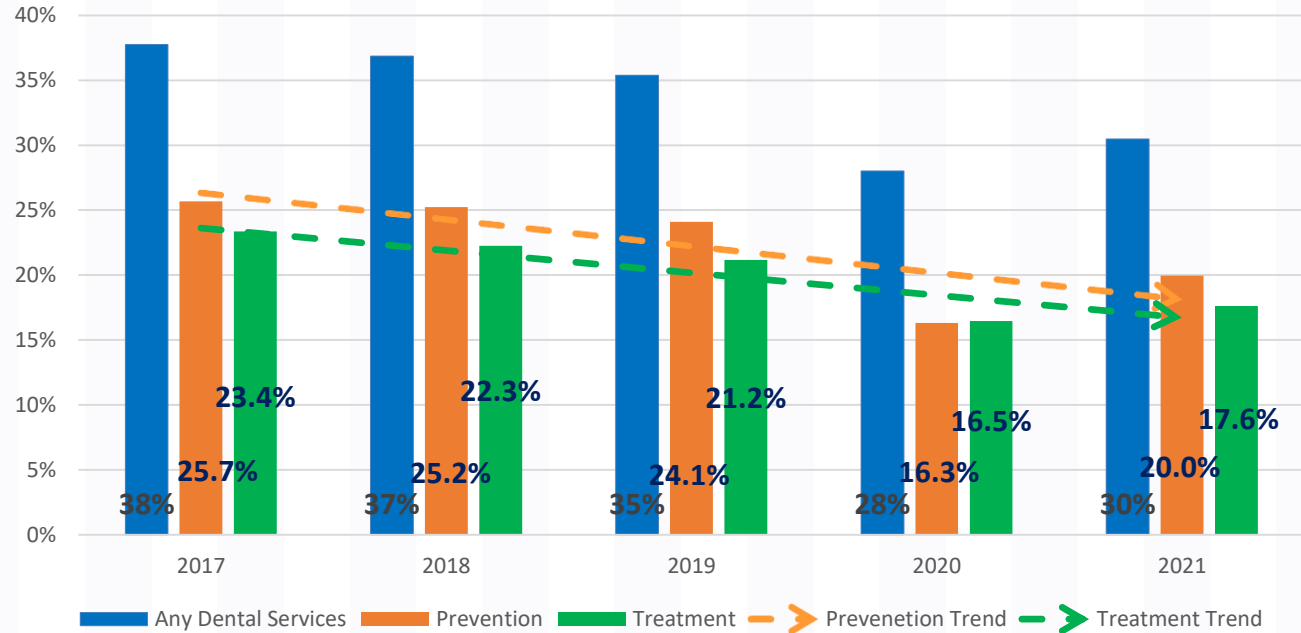
Members' Oral Health – Dental Services for Adults

↑ Slightly higher prevention rate than treatment rate. The 2021 Adult Dental Prevention Rate is 20%

2021 Adult Treatment Rate is 17.6%

↓ 428,045 out of 615,853 adults did not utilize any dental services in 2021.

Dental Services For Adults Calendar Years 2017-2021
CTDP data source



Members' Oral Health – Adult/Child Prevention Rates Improve the longer they are enrolled in HUSKY.

**18
months**

Continuously
enrolled in
Medicaid thru
12/31/21

Adults: 27%
Children: 69%

**24
months**

Continuously
enrolled in
Medicaid thru
12/31/21

Adults: 30%
Children: 74%

**36
months**

Continuously
enrolled in
Medicaid thru
12/31/21

Adults: 42%
Children: 84%

Preventative Interventions for Children: Sealants

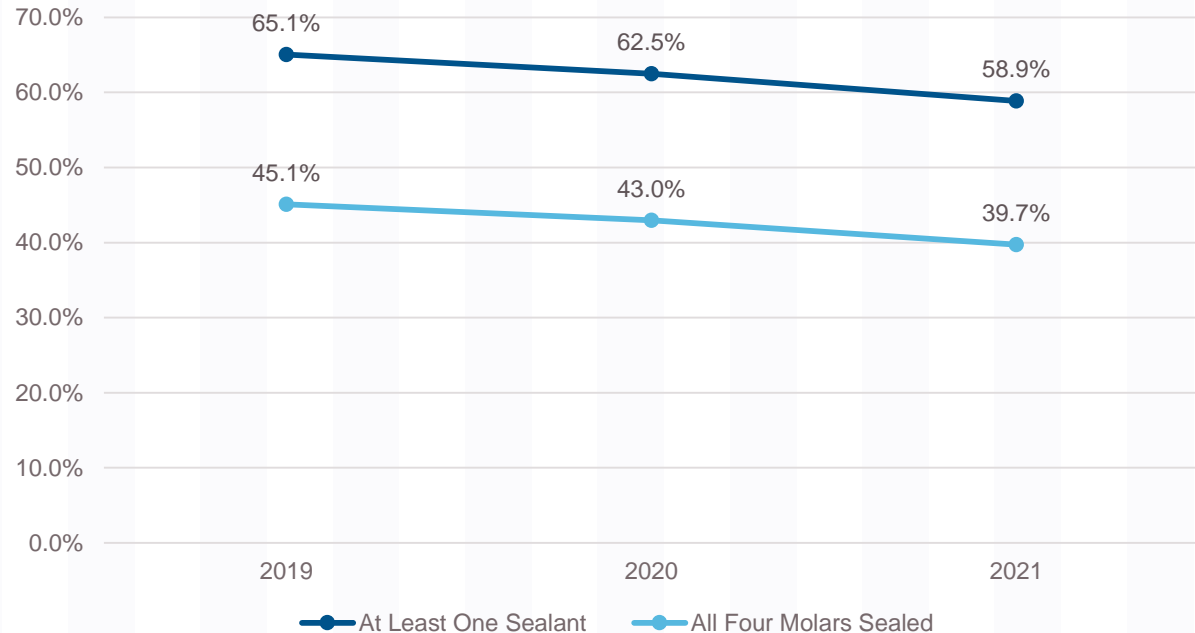


Reduction in dental sealant rates likely pandemic related.

- No national comparison with new core data set yet.
- In previous CMS 416 reporting comparison (sealant data at ages 6-9, 10-14) the national average in 2020 was 4.6%, CT slightly higher at 5.1% Kansas had the highest rate at 8.2%

Sealants On Permanent Molars

[# of Continuously Eligible Children Turning Age 10 in Measurement Year]



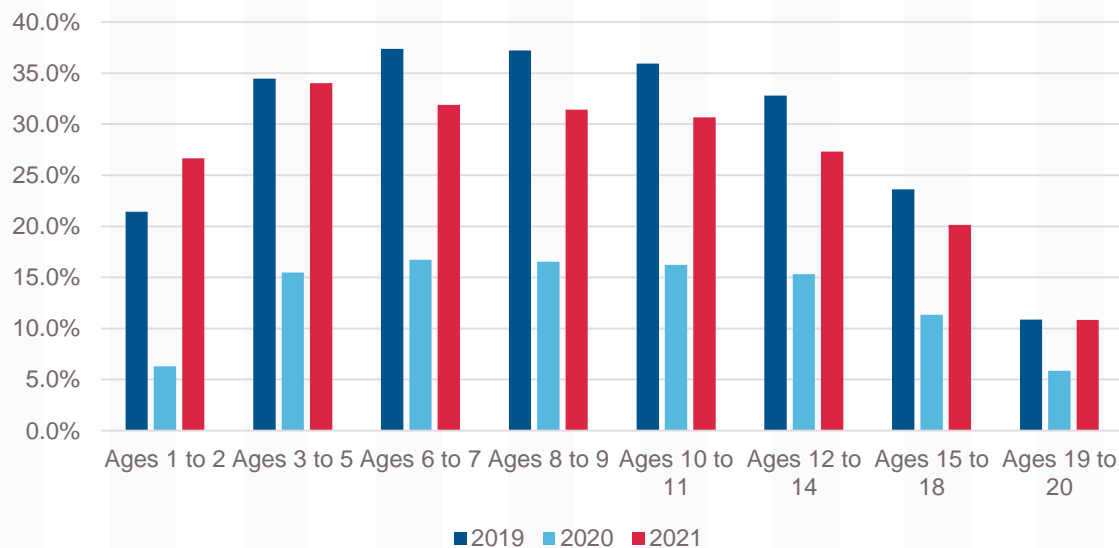
Preventative Interventions for Children – Fluoride Applications



Rates almost back to pre-pandemic levels.



- According to the ADA Dental Quality Alliance Dashboard, in 2018 Connecticut ranked 3rd in Fluoride Varnish Application. National Average in 2018 was 20.39%, CT was 31%.
- 2021 saw a significant increase in FV applications occurring at well-child visits by medical providers (18,667 children).

Topical Fluoride Applications By Age Band
Dentists & Non-Dentists
2019 - 2021

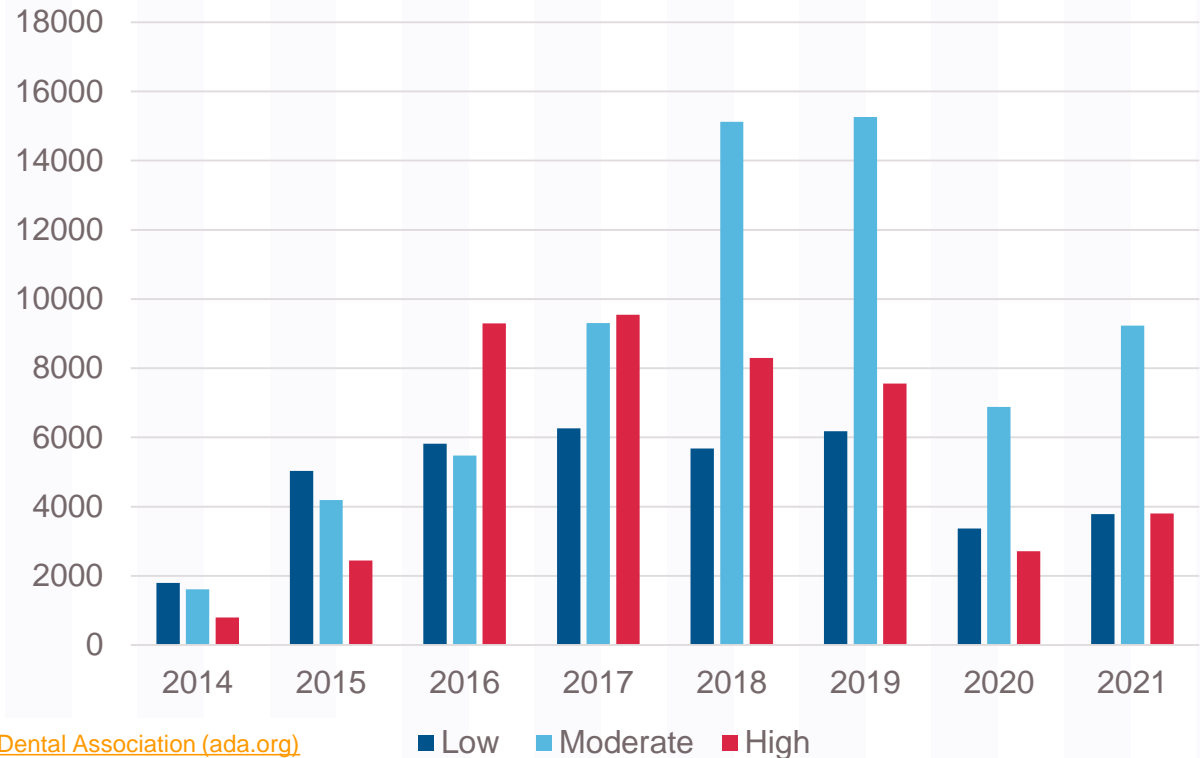


[DQA improvement initiatives](#) | [American Dental Association \(ada.org\)](https://www.ada.org)

Members' Oral Health – Caries Risk Assessments

- Caries Risk Assessments are performed by RDH's in a non-dental office setting (SBHC, Mobile Clinic)
-  Drop in High Risk Caries but rise in Moderate Risk.
-  According to the ADA Dental Quality Alliance Dashboard, in 2018 Connecticut ranked 12th in Documentation Rate of Children Assessed. CT is at 7.50% National Average in 2018: 2.83%

Number of Children Screened Low, Moderate, High Risk Caries Per Calendar Year
CTDHP Data Source



[DQA improvement initiatives | American Dental Association \(ada.org\)](#)

Members' Oral Health – Oral Health Equity Snapshot 2021–2022

Pandemic Impacts	Adults	Male Gender	White Caucasian Adults	Asian & African American Children	Eastern & Rural CT
Asian, Pacific Islanders, & African Americans were most impacted with largest utilization rate changes during the pandemic.	Adults are 40% of the population, yet represent only 29% of the utilizing population.	Members who identify as male (both adults and children) underutilize compared to those who identify as female by 29 percentage points.	<p>Largest total population & the second lowest utilization rate -6.7% from the statewide adult average.</p> <p>Adult Pacific Islanders have largest disparity, however total population is 228 people.</p> <p>Hispanics highest for adults and children.</p>	<p>Asian children had the lowest utilization rate and the highest disparity at -35% from the statewide child average.</p> <p>Followed by Black African American children with -20% disparity from the statewide average.</p>	<p>Eastern CT has lowest utilization rate against statewide combined adult/child average.</p> <p>Urban Core areas have higher utilization rates than rural/small cities.</p>

Study Period: CY2020–2021 Continuously Enrolled HUSKY Health Members

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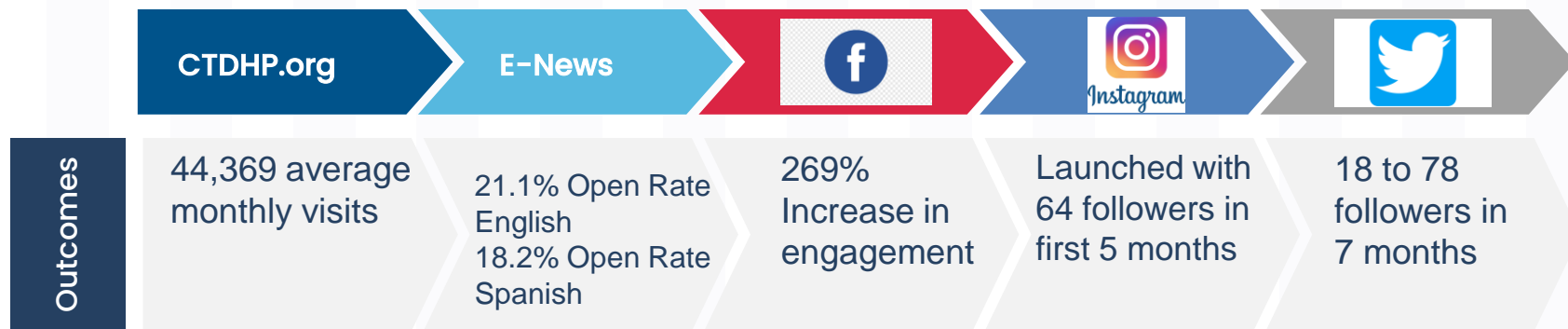
Member Engagement Strategies – Member Campaigns

Dental Visits 60/120 Days from Engagement <i>as of October 2022</i>			
Population – With No Previous Dental Utilization in Prior 12 months	Members Contacted	Dental Visit 60 Days After Engagement	Dental Visit 120 Days After Engagement
Members with No Dental Home	470,925	4.8%	7.6%
Newly Enrolled Members	64,205	9.2%	13.5%
Prenatal Members in CHN Healthy Beginnings	12,373	7.3%	11.4%
Members with Type I Diabetes	3,565	8.7%	14.1%
Members with End Stage Renal Disease* <i>(*Campaign Kicked Off September 2022)</i>	1,459	1.2%	N/A*

Other Member Engagement Campaigns

- ED Oral Health Visit (3,277 Members)
- Problem Focused Exams (5,386 Members)
- Benefit Max (14,706 Members)
- Child Caries Risk Assessments – Medium and High Risk (10,200 Members)

Member Engagement Strategies – Social, Web, and eNews



State FY22

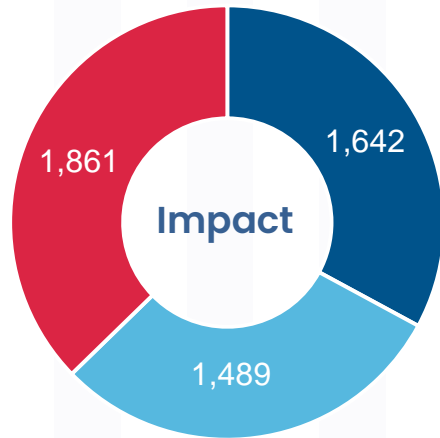
"We Care About Your Dental Health"

Member Engagement Strategies–Targeting Low Utilization/Large Member Population Areas

Impressions	 Geofenced Ads	 Buses & Bus Shelters	 Billboards
Stamford/Norwalk	516,397	3,024,000	--
Waterbury/Naugatuck	--	--	4,650,028
Middletown/Meriden	503,706	2,016,000	--
Norwich	--	7,365,232	--
<i>Subtotal</i>	1,020,103	9,683,632	4,650,028
<i>Total Impressions</i>	15,353,763		

Member Engagement Strategies

Community Engagement



- HUSKY Members Reached
- Community Outreach Activities
- Community Org Staff Reached

1st Safety Net
Community Services

2nd Pediatric and
Family Practices

3rd Retail,
Grocery/Bodega
& Shops

53,876 # of Materials

