

Impact of AllCare Health's First Tooth Training

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CORE

Center for Outcomes
Research and Education

BACKGROUND

The Problem: Childhood tooth decay is the most common chronic disease of childhood.

Solution: Oregon Oral Health Program and the Oregon Oral Health Coalition launched First Tooth in 2009.

AllCare's Goal: To reduce childhood caries in Oregon by offering providers the First Tooth training to integrate preventive oral health services into other infant and child services.



FIRST TOOTH EVALUATION

Objective 1

To assess the impact of the First Tooth training on children's receipt of oral health assessments and fluoride varnishes.

Objective 2

To assess the impact of the First Tooth training on specific dental utilization:

- Any dental service
- Preventive, diagnostic, and treatment dental services

STUDY DESIGN

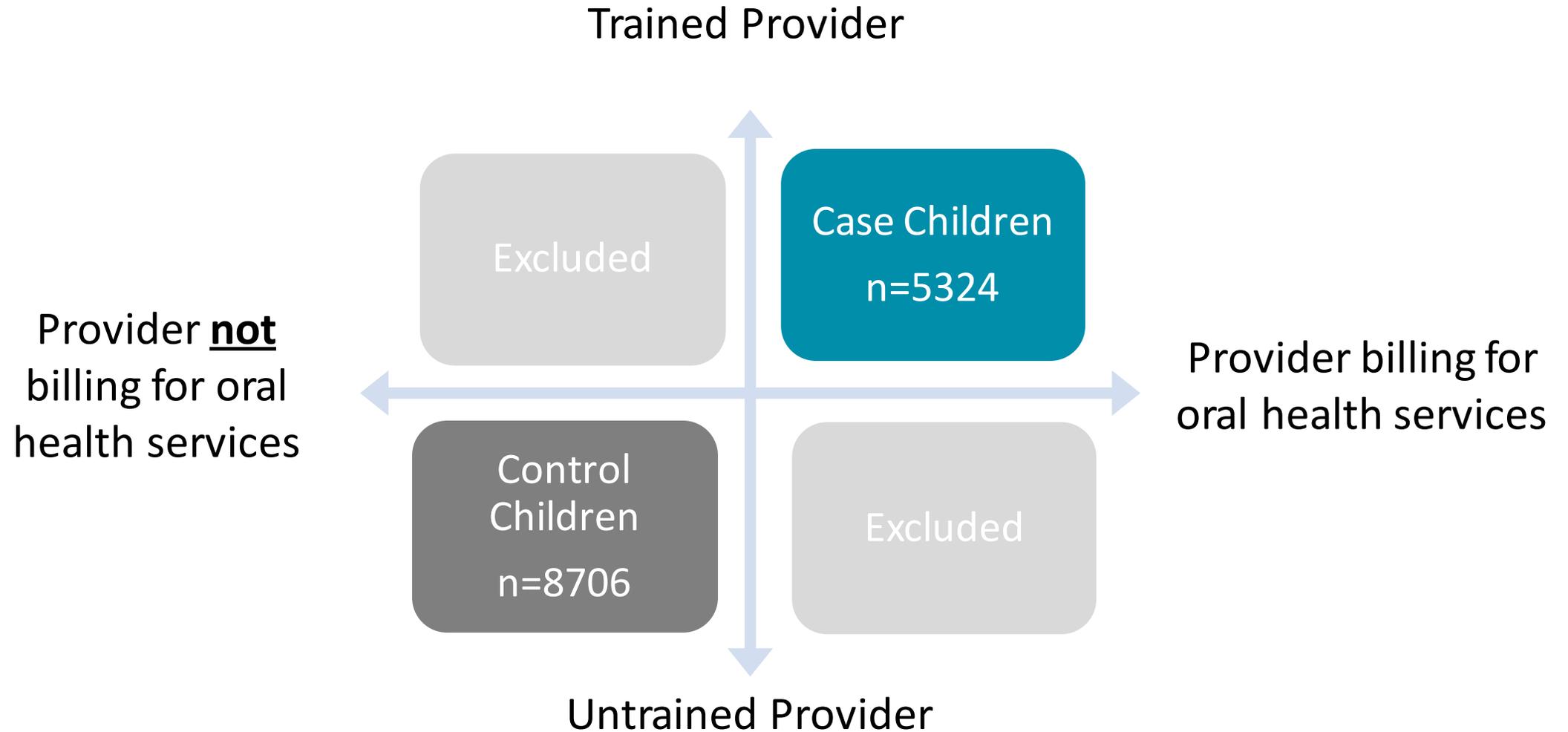
Eligibility Criteria

- Between 0-19 years of age
- At least 6 months continuous AllCare Health coverage
- Attend at least one primary care visit in 2014-2016
- Not receiving care at a FQHC

Data Sources:

- AllCare Health Medicaid enrollment and claims data
- First Tooth program data

Cases vs. Controls

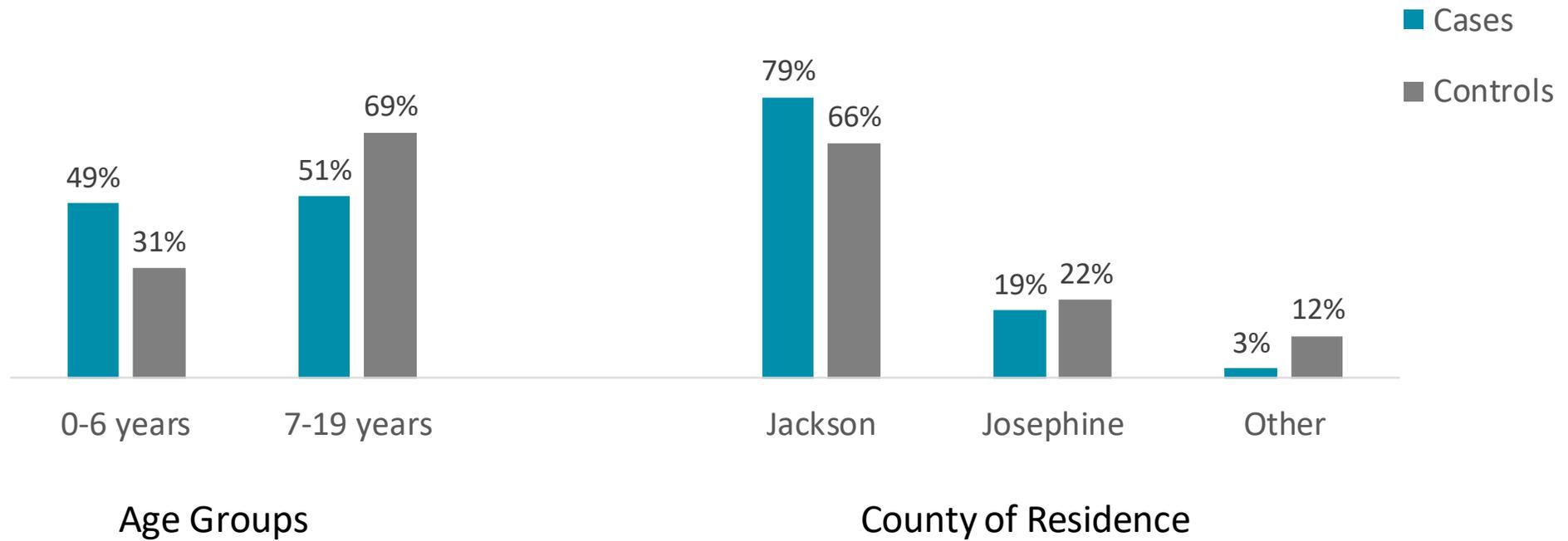


Analysis

- Demographic and health profiles for both case and control groups.
- Adjusted Relative Risk
- Looked at children 0-6 and 7-19 separately.

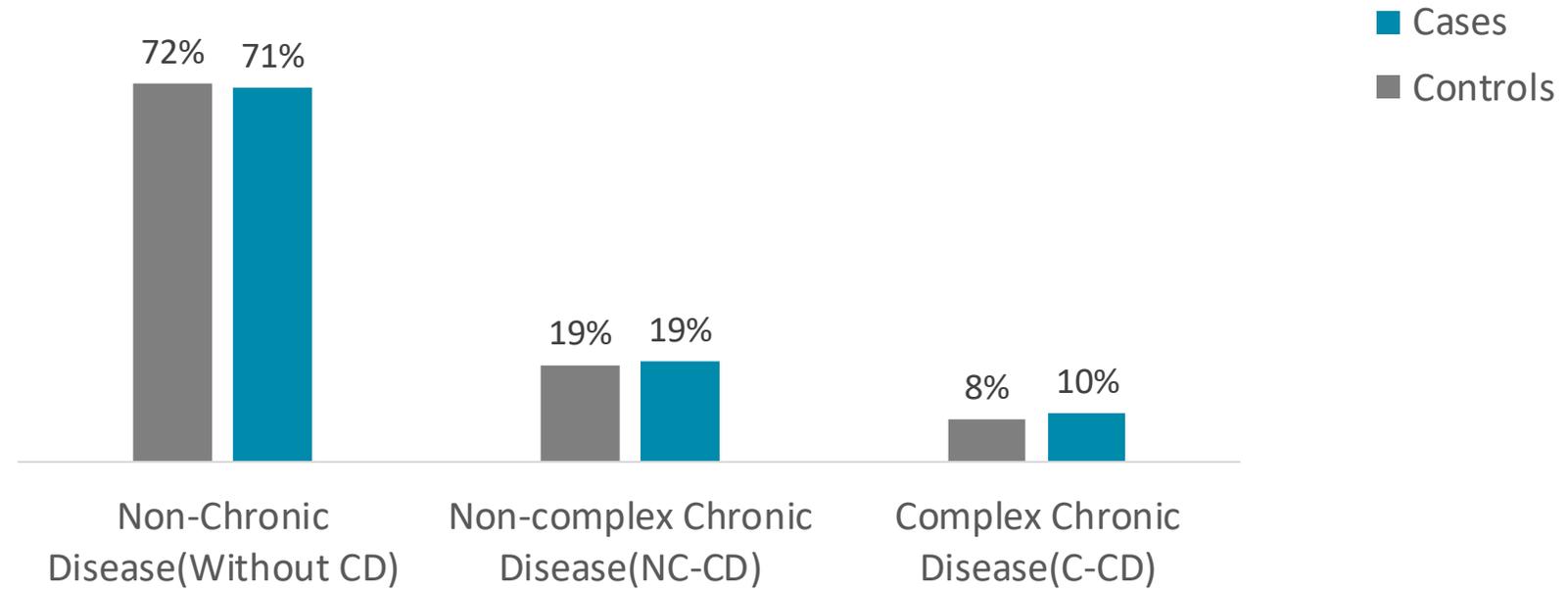
RESULTS

Demographics



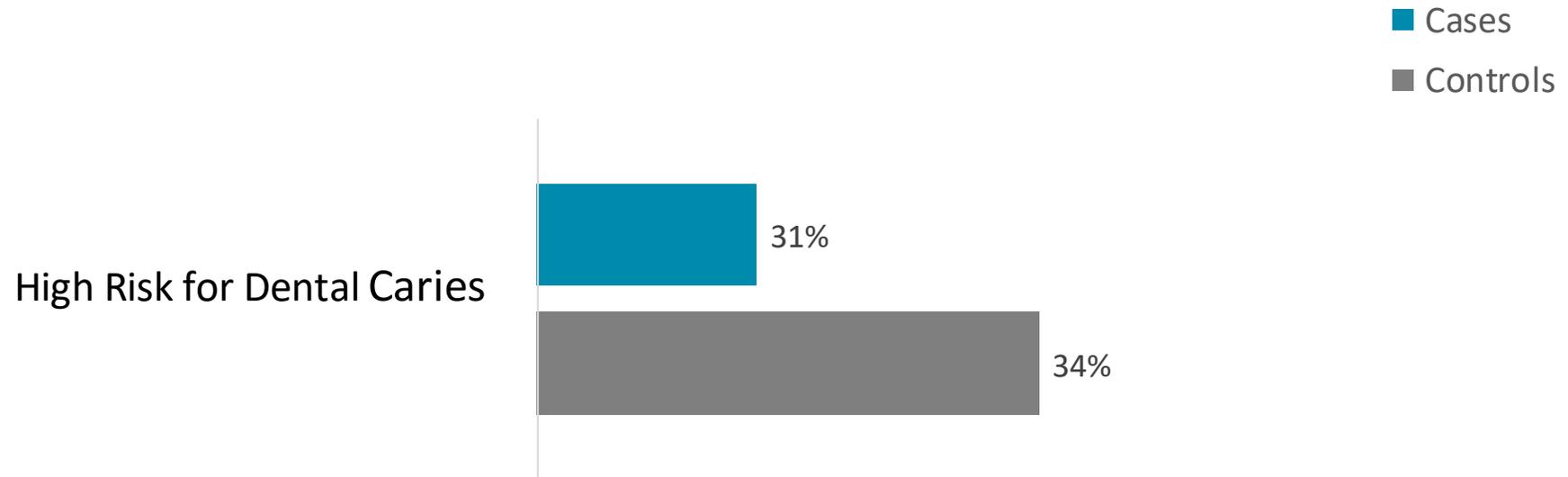
- There were no differences by gender, race/ethnicity and language between case and control children

Health Profiles

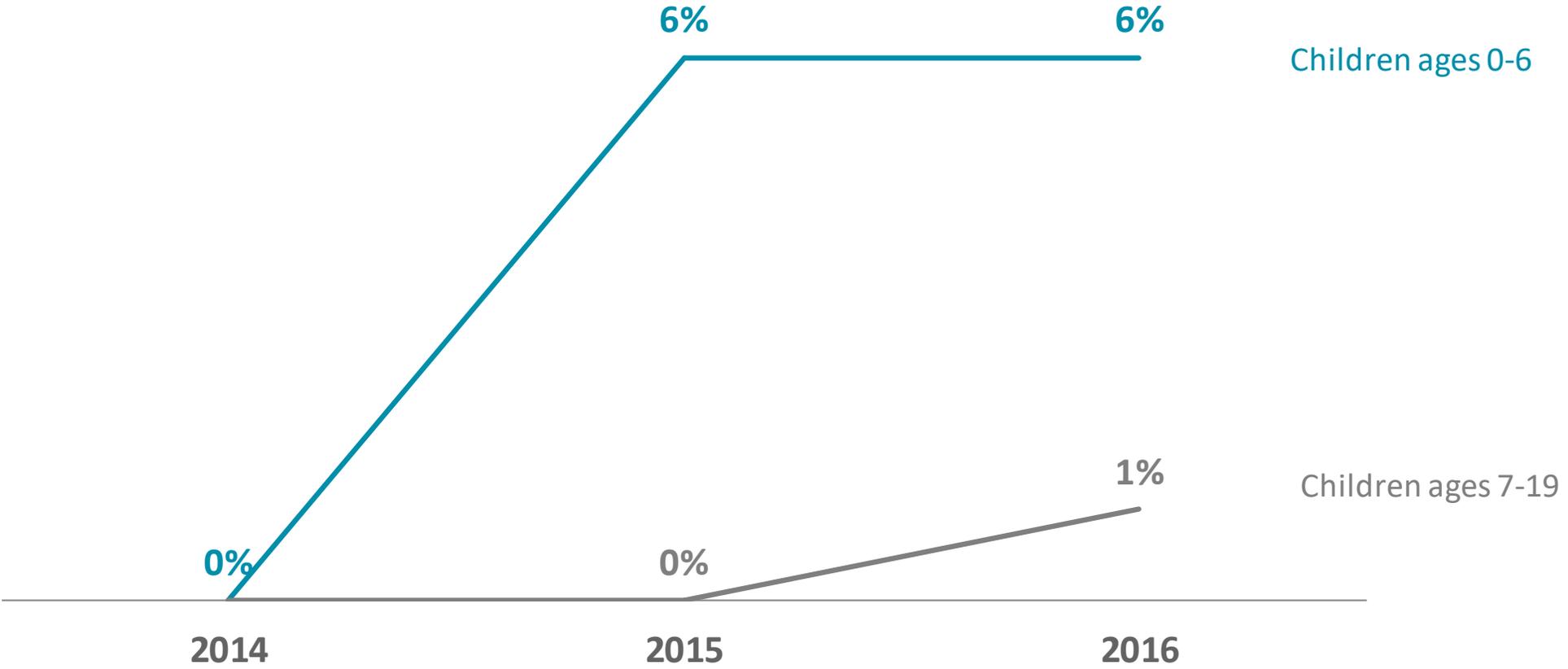


PMCA Risk Scores

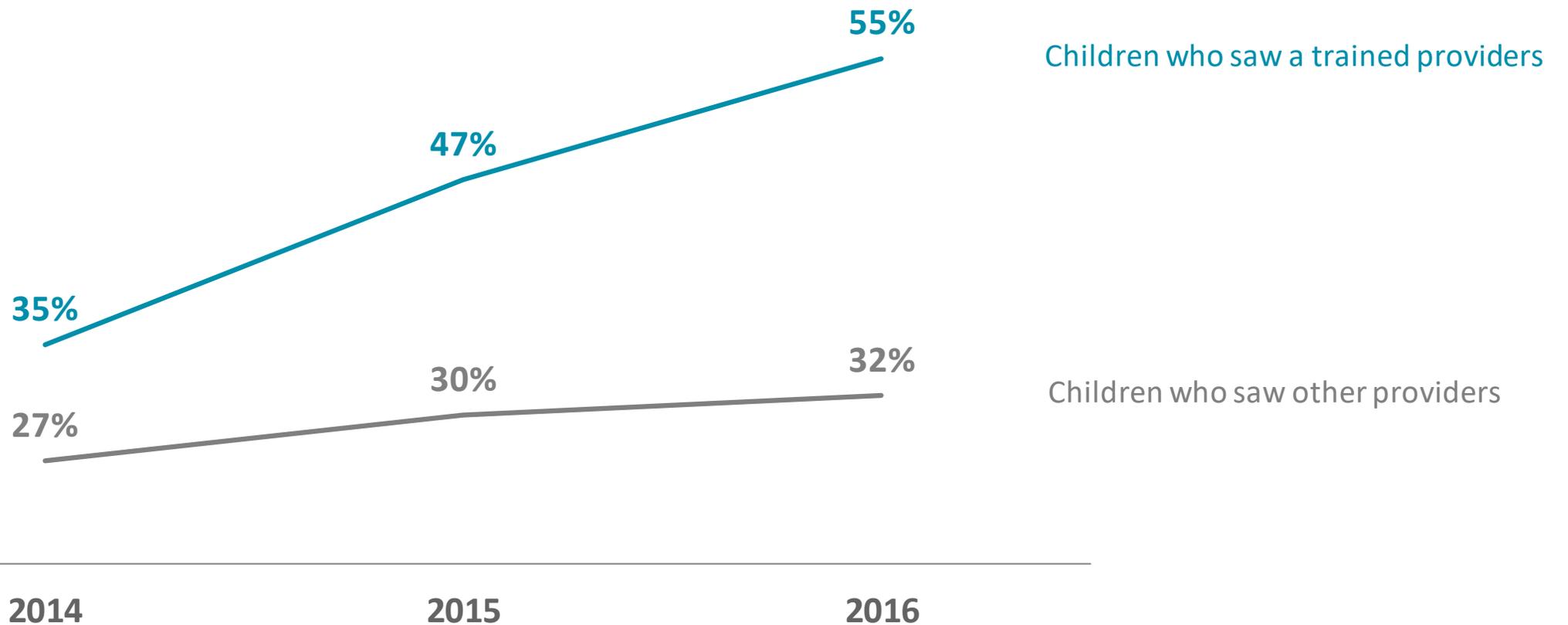
Health Profiles



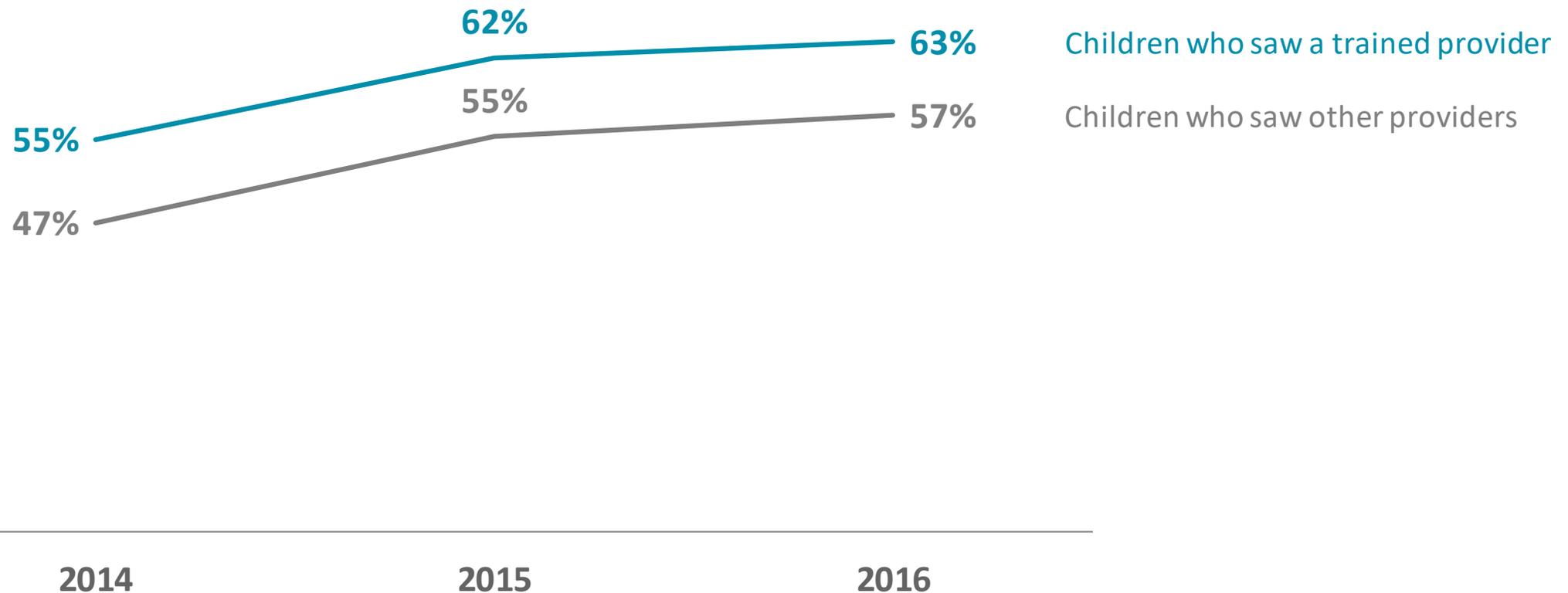
The percent of **younger children** receiving oral health assessments increased in 2015



Younger children (ages 0-6) who saw a medical provider who had received First Tooth training were more likely to receive fluoride varnishes



Older children (ages 7-19) who saw a medical provider who had received First Tooth training were more likely to receive any dental service



CONCLUSIONS

-  Use of dental services are increasing in general.
-  AllCare Health children who saw First Tooth trained providers were
 - ... more likely to receive oral health assessments (younger children)
 - ... more likely to receive fluoride varnish (younger children)
 - ... more likely to receive any dental service (older children)

LIMITATIONS

- Administrative claims data may underestimate health care utilizations.
- Lack of provider IDs in the First Tooth program data.
- Could not account for providers trained by ‘Smiles for Life’.
- Unable to include children at FQHCs

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