



**Healthy NC 2020: Oral Health Subcommittee Meeting  
Friday, April 30, 2010**

**Subcommittee Members and Interested Persons Present:** Deana Billings, Lisa Harrison, Gary Rozier, Mark Casey

**NCIOM Staff and Interns:** Mark Holmes, Paul Mandsager

**Proposed Final Objectives and Targets**

**Objective 1: Increase the percent of children enrolled in Medicaid ages 1-5 who received any dental service during the previous 12 months.**

Current: 46.9% (2008)

Target: 58.8% (tentative)

Data source: North Carolina Division of Medical Assistance

*Rationale for selection:* Inadequate access to dental care is commonplace among children of low-income families. For young children, failure to prevent dental disease can result in dysfunctional speech and compromised nutrition. On average, nearly half of all young North Carolinians ages 1-5 years enrolled in Medicaid receive any dental care in a year.

*Rationale for target:* Half the 2000-2008 rate, which was marked by rapid expansion of in the number of providers who could perform dental services in this age group (e.g., Into the Mouths of Babes).

**Objective 2: Increase the percent of 5<sup>th</sup> graders with sealants.**

Current: 44% (2008-9)

Target: 61% (tentative)

Data source: North Carolina Division of Public Health

*Rationale for selection:* Dental sealants, which are thin plastic coatings applied to the chewing surfaces of the back teeth, protect against tooth decay. Fewer than half of all North Carolina 5<sup>th</sup> graders have sealants, which can reduce the rate of dental decay by 80%.

*Rationale for target:* 90<sup>th</sup> percentile of NC counties.

**Objective 3: Reduce the average number of decayed, missing, or filled teeth (dmf) among kindergartners.**

Current: 1.5 (2008-09)

Target: 1.04

Data source: North Carolina Division of Public Health

*Rationale for selection:* Dental decay in children can be measured by the number of teeth affected by decay, the number of teeth that have been extracted, or the number of teeth successfully filled. The prevalence of decayed, missing, or filled teeth in young children is higher in low-income populations and in rural communities without fluoridated water.

*Rationale for target:* 10<sup>th</sup> percentile of NC counties.

**Next Steps**

NCIOM will explore the possibility of estimating the population for whom sealants are indicated. Mark Casey will request county-specific data on objective #1.