

Framework for Illinois' Oral Health Plan

The U.S. Surgeon General's Report, *Oral Health in America*, published in May 2000, describes both the "marked improvement in the nation's oral health in the past 50 years" and the simultaneous "silent epidemic of oral disease affecting our most vulnerable citizens." Huge strides have been made in improving the oral health of Illinoisans. Community water fluoridation, dental sealants, advancements in dental technology and growing public awareness of positive oral health behaviors have made it possible for many in Illinois to maintain optimal oral health for a lifetime.

At the same time Illinois mirrors the nation in that oral disease remains pervasive among families with lower income or less education, the frail elderly, those with disabilities, those who are under-insured and other minority groups. Low income is a major risk factor for dental decay and periodontal disease. These preventable oral diseases account for a great deal of tooth loss and can focus infections that influence the outcomes of serious health problems such as cardiovascular disease, diabetes, pre-term low birth weight babies and others.

The major findings and suggested framework for action put forth by the Surgeon General form the basis for Illinois' Oral Health Plan. (See Appendix)

Statewide Efforts to Improve Oral Health in Illinois

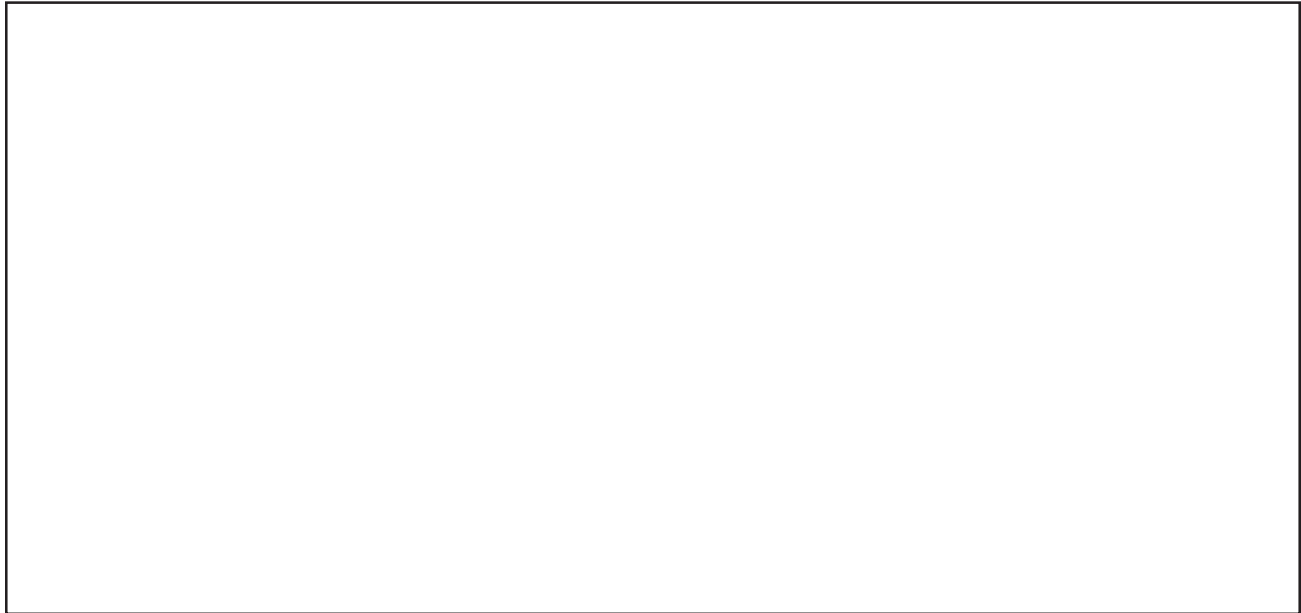
Community Water Fluoridation

Community water fluoridation is the most effective public health measure available to prevent and control dental caries. Illinois is one of only twelve states in the US with mandatory fluoridation laws. This statute requires all community water systems to adjust fluoride to optimal levels (0.90 - 1.20 milligrams per liter). (See Map1, page 8) The Illinois Department of Public Health works closely with the Illinois Environmental Protection Agency to monitor community water supplies and provides education and technical expertise to the water system operators in order to keep fluoride levels optimal for the prevention of oral disease. Because of community water fluoridation residents of Illinois experience significantly less dental decay. In 1997, more than 85% of the Illinois population received benefits of fluoridated water, a level that surpasses the 75% percent goal recommended by Healthy People 2010 objective for the nation. However, approximately 700,000 Illinois residents served by community water systems do *not* receive optimal levels of fluoride. Another 1 million Illinois residents are not served by community water systems.

Oral Health Status of Illinois Children

Project Smile, a statewide oral health survey conducted between 1993-1994, gathered the most reliable estimates to date of dental disease in Illinois children. This "snap-shot" survey was funded through a grant by the Centers for Disease Control and Prevention along with Title V of the Maternal and Child Health Block grant funds provided to Illinois, and was conducted by the Illinois Department of Public Health in collaboration with the University of Illinois at Chicago College of Dentistry. The survey results demonstrated that a very large number of Illinois school children still suffer from preventable oral health problems, lack basic preventive care (as determined by sealant prevalence), and that significant oral health disparities exist. (See map 2, page 9) As

a result of the information gathered through this survey, the Illinois Department of Public Health intensified efforts to expand its school based sealant program. More than 500,000 dental sealants have been applied to over 139,000 children since 1995.



Oral Health Needs Assessment & Planning

Illinois does not have a state oral health surveillance system in place that produces uniform agreed-upon data, collected routinely, and that can be utilized to assess oral health status and oral health service delivery trends. Communities throughout Illinois in part filled this void, and established systematic oral health status assessment. Since 1996, more than 50 grantees, representing 61 local health departments have participated in the Oral Health Needs Assessment and Planning Program developed by the Illinois Department of Public Health. (See map 3, page 11) A key element of the planning process is the development of a broad based community workgroup that includes oral health professionals, public health professionals, health care providers and other community partners with an interest in oral health. The planning program helps communities to develop local partnerships for collecting data, identify oral health needs, and build oral health improvement plans. These community assessment results represent a growing database of information that suggests both access challenges and disparities in oral health exist in Illinois, particularly for low-income persons of all ages.

Data from the oral health needs assessment completed in fiscal years 1997 and 1998 in 38 counties across Illinois tell that the following issues are top and common priorities in these counties:

- Access to oral health care for specific populations
- Development of dental sealant programs
- Oral health education programs
- Early childhood caries intervention programs
- Fluoride status improvement
- Oral cancer prevention (See map 4, page 12)

A survey sent to 29 grantees completing oral health needs assessments and community plans during these years indicated that a vast majority of grantees, 80%, *felt that the oral health assessment process was instrumental* in addressing oral health issues at the community level. Seventy percent felt that local resources and barriers had been determined and 66% percent had already implemented intervention strategies based on their local plans.

Formation of the IFLOSS Coalition

In 1998 a private-public partnership called the IFLOSS Coalition made up of local health agency administrators and public health dental clinic directors was formed by communities working together to improve oral health. (See map 5, page 14) The Coalition is led by local health department administrators and has more than 50 active participants. The mailing list of interested organizations has grown to number over 300. The Coalition was developed to help expand safety net clinics and outreach programs for uninsured and under-insured individuals. Partners in the statewide IFLOSS Coalition include local health departments, dentists and dental hygienists, community health centers, maternal and child health workers, schools, state agencies, advocacy groups, dental and dental hygiene associations, and other community members. In its short history, the IFLOSS Coalition has established a statewide presence, and also developed materials and information to assist communities with the start up and maintenance of dental clinics for the underserved. The group has developed interventions that address access to oral health care. They include a legislative agenda promoting increased funding for Medicaid and public health oral health programs, an oral health marketing plan, a public dental clinic development manual, and quarterly meetings allowing partners to network and build capacity.

Funding for Oral Health Through The Illinois Department of Public Aid

The Illinois Department of Public Aid (IDPA) administers the Medicaid budget designated for oral health care by the Illinois General Assembly. The Department of Public Aid has made recent and numerous changes in the Medicaid program to increase the number of dentists serving Medicaid clients, increase the reimbursement rates for most needed services, streamline paperwork and improve timeliness of payments to participating providers. IDPA has also implemented the state's Children's Health Insurance Program, called KidCare. Dental coverage has been extended to an additional 117,000 children and pregnant women since the implementation of the program in 1999. The IDPA has re-activated Dental Policy Advisory Council of oral health professionals to assist the department in planning and decision-making for dental Medicaid programs.

Private Partners and Illinois Oral Health

The Illinois State Dental Society remains pro-active in its efforts to reduce oral health disparities. The Donated Dental Service (DDS) Program operated by the Illinois Foundation of Dentistry for the Handicapped provides donated dental care to homeless, mentally compromised or disabled persons. Over 600 ISDS member dentists participate in this program, the Take Two Program. The Take Two Program asks member dentists to provide dental care to at least two foster children. In collaboration with the Illinois Dental Hygienists' Association a Long Term Care in-service training program is currently being developed to provide long term care facility staff with training in the management of the oral health of residents. On behalf of their constituents, the Illinois Rural Health Association, the Chicago Partnership for Health, the Campaign for Better Health Care and many others in Illinois have worked to identify barriers to accessing oral health services in recent years, and they include transportation, language and insurance coverage. A few examples follow:

- The Illinois Rural Health Association sponsored a Policy Forum on Access to Oral Health Care in Rural Illinois in February 2001 with specific recommendations to address oral health disparities among rural populations.
- The Campaign for Better Health Care is implementing a statewide access to health care program with oral health as a component.
- The Chicago Partnership for Health has developed a series of recommendations for addressing oral health disparities in the City of Chicago.
- The University of Illinois at Chicago, Center for Workforce Studies released its study on *Access to Dental Services for Low-Income Children* in 2000. Another study on the uncompensated care provided by health care providers and dentists in Illinois contained recommendations to expand access and services to low income and vulnerable populations.

On a broader scale, Public Health Futures developed a preventive health framework for Illinois including actions necessary to improve the oral health status of Illinoisans.