Pay for Prevention: Oral Health Services at NH WIC
New Hampshire Department of Health and Human Services, Division of Public Health Services, Oral Health Program

Background
A visual screening and survey of Women, Infant, and Children (WIC) clients at 6 locations throughout New Hampshire conducted in 2011 provided data about the clinical needs of this vulnerable population and the barriers that prevent them from receiving oral health care. The survey paved the path for the WIC Pay for Prevention project.

Survey Findings:
- 9% of children screened had a history of decay, and 7% showed signs of active untreated decay.
- There are many barriers that prevent parents from accessing dental care, with the most frequent being that it is difficult to find a dentist who accepts Medicaid insured patients.
- Many parents are unaware that early preventive dental care should begin by age 1.

Barriers to Care
- Finding a dentist who accepts Medicaid
- High cost of dental care
- Lack of transportation
- Difficulty in taking time off from work
- Fear of dental procedures

"Dentist will not see him until he is 3 years old."
"Did not know that he should be seen at one year."

Survey findings along with current research indicated that parents and children participating in WIC programs would benefit from early preventive dental interventions provided on-site by public health hygienists.

What Research Tells Us:
- The majority of children with tooth decay are from families of low socioeconomic status. Many of these children, 5 years old or younger, are enrolled in WIC.
- Tooth decay is the most prevalent chronic disease in children, despite its highly preventable nature.
- A child’s first dental visit should take place within six months of the arrival of the first primary tooth or by age 1.
- Approximately eight percent of children have tooth decay by age 2.
- A dental visit by age three is often too late for preventive care. Treatment of early childhood decay is often expensive and invasive, requiring hospitalization and dental treatment under general anesthesia.

Current State
In 2014, the HHF Foundation, the Jessie B. Cox Foundation, and the Northeast Delta Dental Foundation funded the WIC Pay for Prevention Project; a partnership between the NH DPHS Oral Health Program, public health dental hygienists, and WIC staff in Concord, Keene, and Pittsfield, to provide on-site preventive dental services to WIC enrolled pregnant women and children. The goal of the project was to determine if this service delivery model could be sustained without supplementary grants.

In year 1, approximately 500 children and 90 pregnant women received preventive oral health services in weekly dental clinics:
- Oral health screening
- Oral health education
- Dental sealants
- Fluoride varnish
- Interim therapeutic restorations (temporary fillings)
- Referrals to participating dental practices to treat urgent needs

Monthly project costs average approximately $7,000.
Early results indicate that under the current NH Medicaid reimbursement schedule, the project is unsustainable without grant funding. Under the current system:
- Public Health Dental Hygienists enrolled as Children’s Health Assurance Program (CHAP) providers can only bill for 2 out of the 6 preventive services provided to children.
- Medicaid does not cover dental services for adults.

First year findings:
- 29% of children screened were under 1 year of age.
- 43% of pregnant women screened from Concord WIC had urgent dental needs.
- 29% of visits were repeat visits.

Which is Better?
The WIC Pay for Prevention project:
- Takes oral health care to where high-risk clients seek other services.
- Builds trust in a familiar setting with an established support system.
- Eliminates barriers including cost, transportation, fear, and additional time away from work.
- Pay for Prevention is a patient-centered innovative model of care!

Looking Forward
- Evaluation of project sustainability and final report anticipated to be complete in April of 2016.
- Oral Health Program staff is in training to conduct a return on investment analysis to demonstrate value.
- Oral Health Program staff is seeking additional funding to extend the project period to allow for data collection on improved oral health outcomes of WIC clients.

Acknowledgments
The New Hampshire Oral Health Program would like to thank our funders, WIC, NH Medicaid, Dr. Richard Niederman, NYU College of Dentistry, and participating area dentists and public health dental hygienists for their support of this project.

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