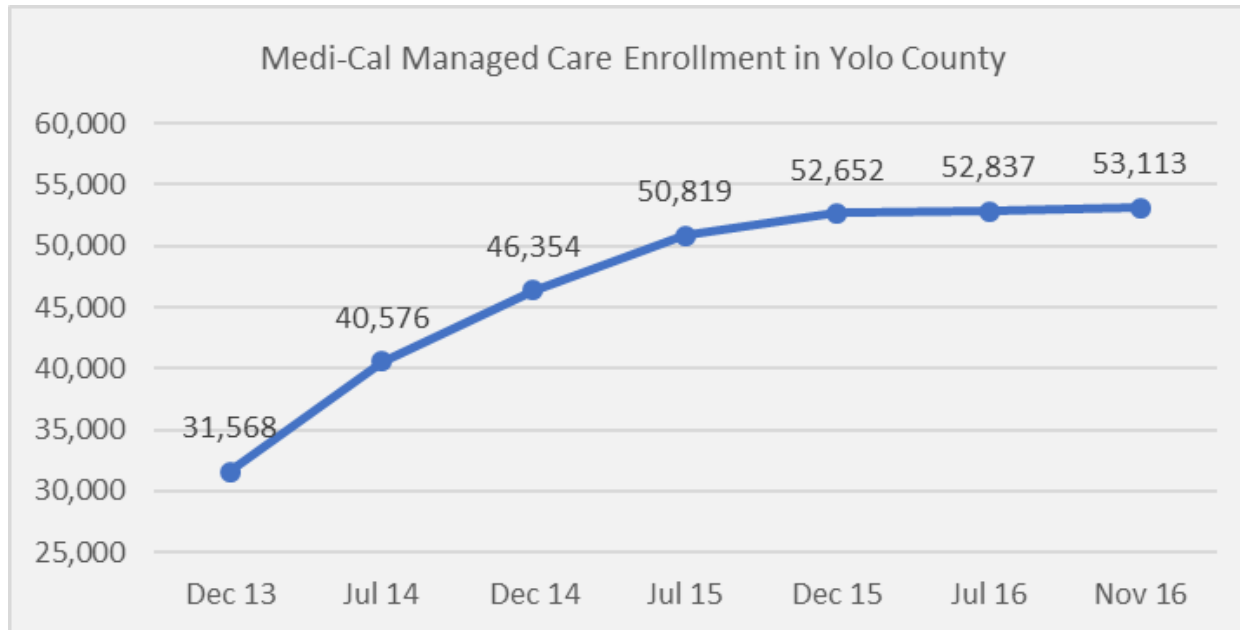


Yolo County Oral Health Strategic Plan 2017-2020

Yolo County Oral Health Strategic
Plan Steering Committee

Secondary Data Analysis – Medi-Cal Enrollment

- Medi-Cal enrollment increased dramatically since 2013 due to the ACA, with most growth occurring among adults
- ~11% of Yolo County residents uninsured, but up to 1 in 3 privately insured likely lack dental coverage



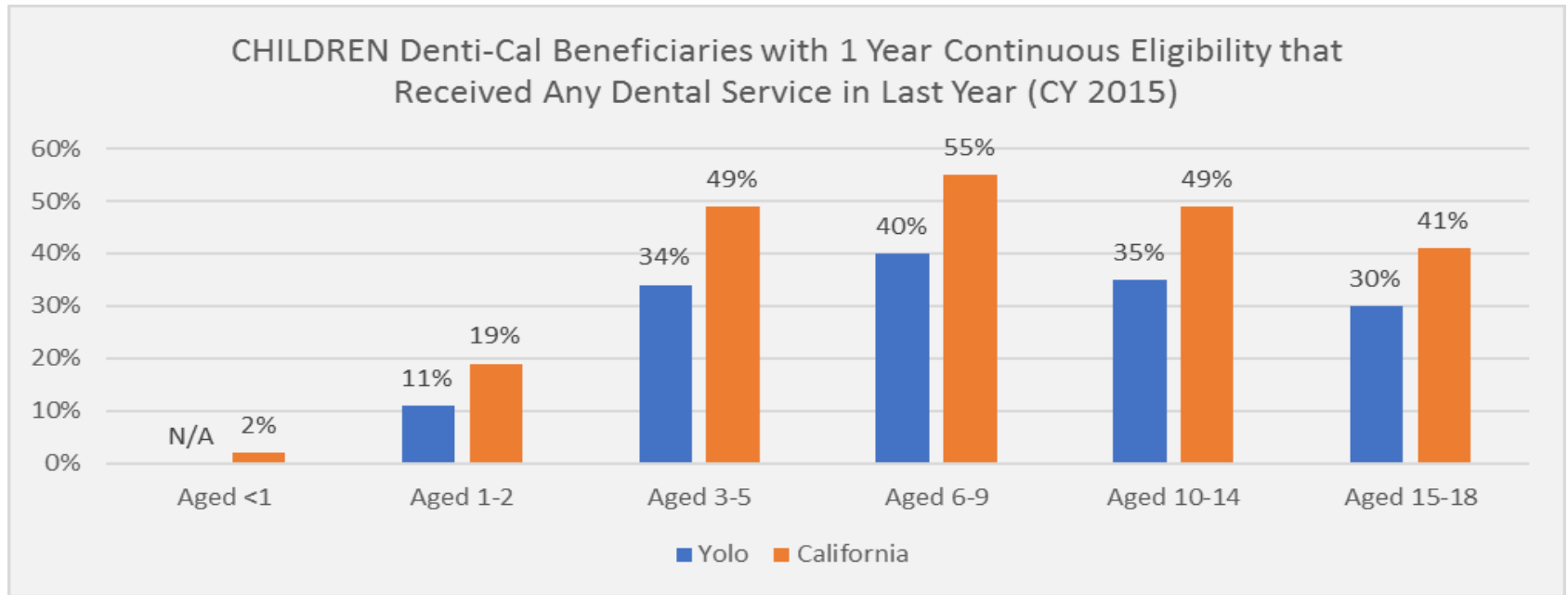
Secondary Data Analysis – Provider Supply

- In 2013, Yolo County was among the 16 California counties with an insufficient number of providers willing to accept new child Denti-Cal enrollees (California State Auditor Report)

County	Accept NEW Child Denti-Cal Beneficiaries (Provider to Beneficiary Ratio)
Yolo	1:2,487
Sacramento	1:2,585
Napa	1:1,767
Solano	1:1,588
California Standard	1:2,000

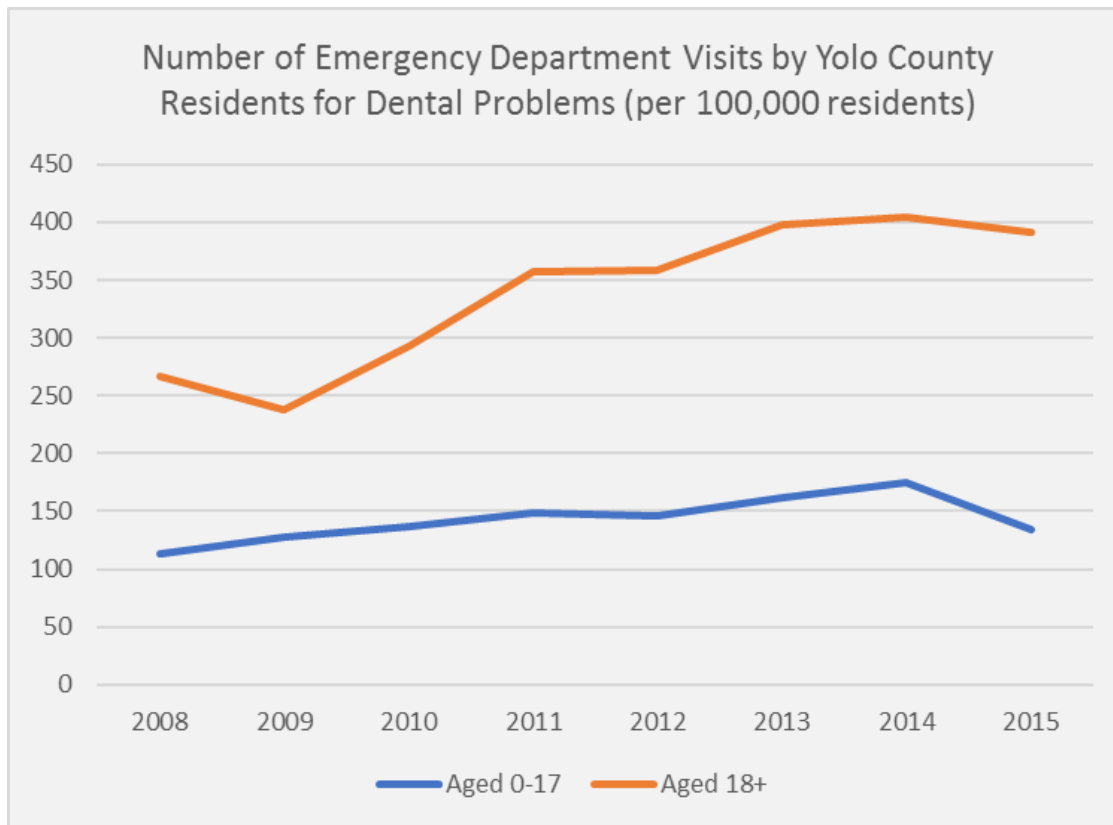
Secondary Data Analysis – Denti-Cal Utilization

- Yolo County Denti-Cal beneficiaries utilize services at notably lower rates than California Denti-Cal beneficiaries overall – especially children



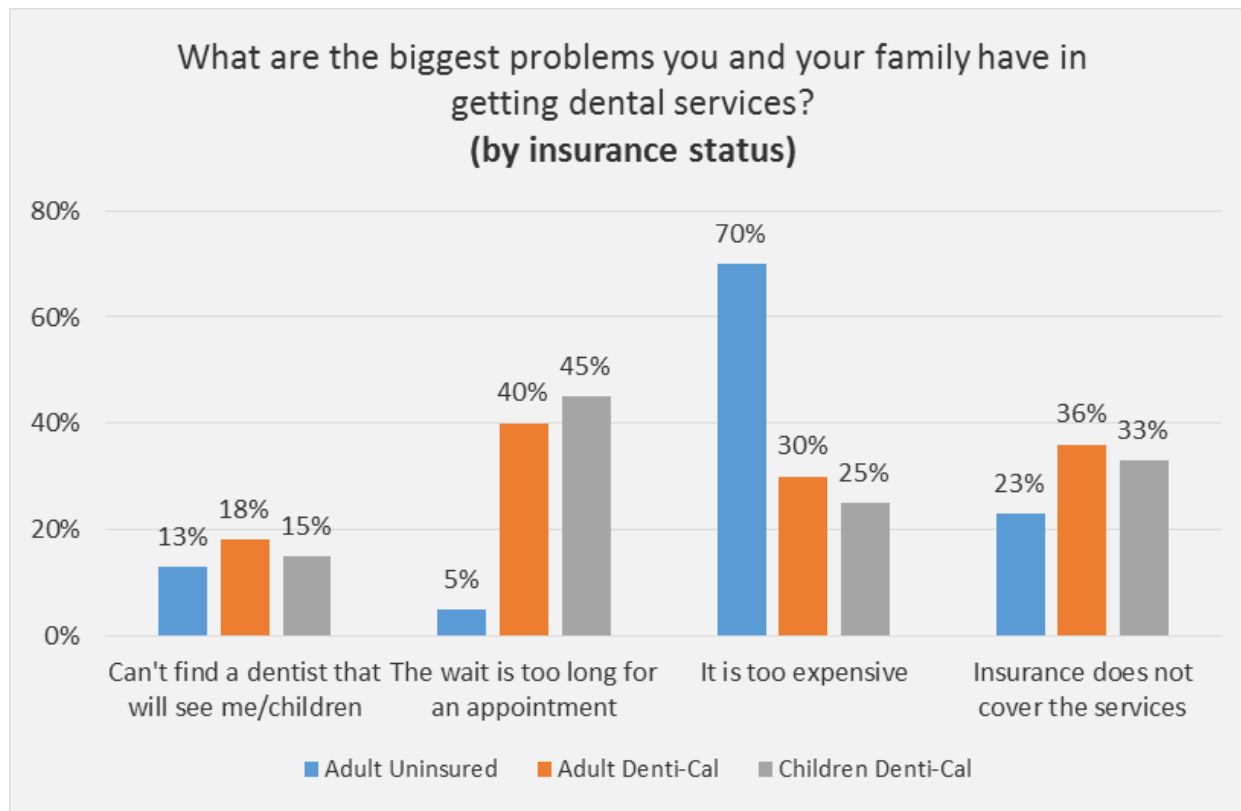
Secondary Data Analysis – ED Visits for Dental

- The rate of ED visits by Yolo County residents with dental problems as principle diagnosis increased between 2008 and 2015 – especially among adults



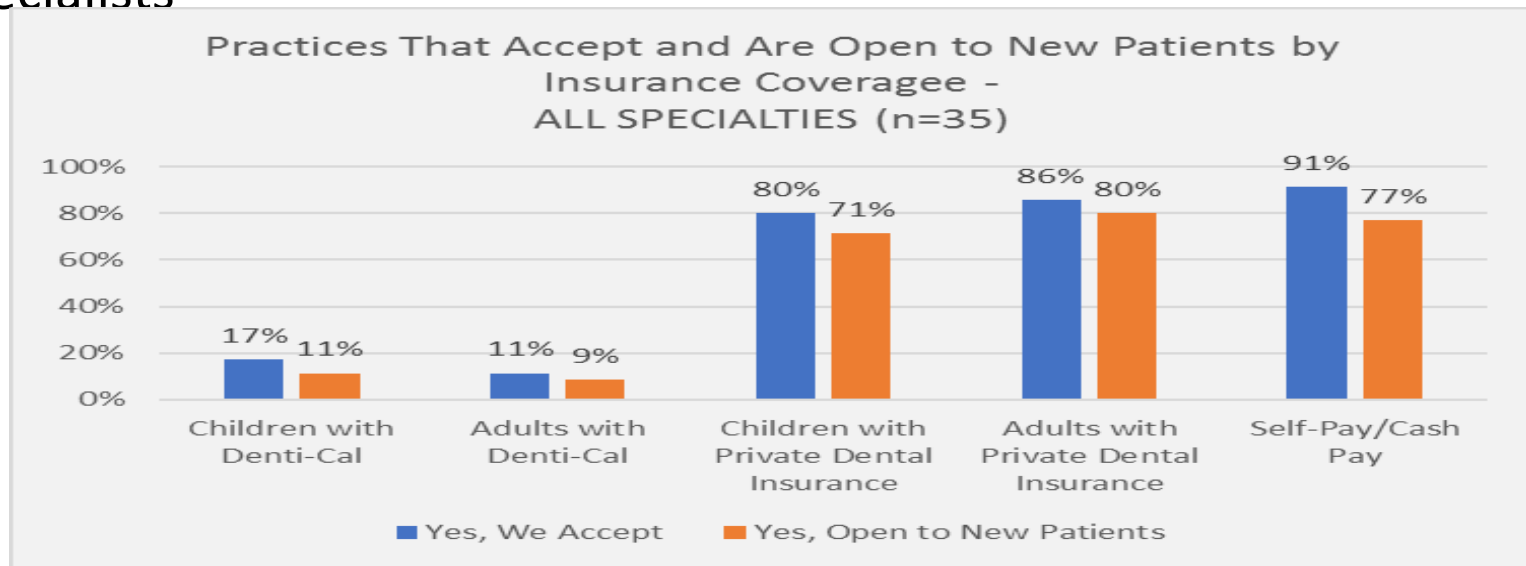
Community Resident Survey

- 507 responses (51% Spanish speakers)
- Biggest problem accessing dental services is long wait times for appointment for both adults and children with Denti-Cal (45% and 40%)
- 30% of adult respondents lacked coverage and 23% lacked a usual source of care



Community Dental Provider Survey

- 39 responses (est. 116 licensed dentists in Yolo)
- A very small number of dentists accept Denti-Cal, including virtually no specialists



- Oral health priority ranking
 1. Fluoridating water (92% support)
 2. Increasing access to dental services for children
 3. Expanding dental screening and prevention services for children

Community Health Center Survey

- 12,081 dental patients in 2016 / 76% Denti-Cal
- Limited capacity to meet patient needs (1 mo+ wait)
- Significant specialty access issues for Denti-Cal
 - Endodontic, periodontic, oral surgery
- Oral health priorities
 1. Increasing access to dental services for ADULTS
 2. Expanding dental screening and prevention services for children
 3. Integrating oral health with primary care
 4. Fluoridating the water in our communities

YOLO COUNTY ORAL HEALTH STRATEGIC PLAN: July 2017- June 2020

May 8, 2017

1. Raise Community Awareness About Oral Health

- 1.A. Conduct Media/PSA Campaign to Elevate Public Awareness and Value of Oral Health
- 1.B. Educate Elected Officials/Community Leaders about Oral Health Policy Options and Considerations
- 1.C. Monitor and Report on Oral Health Outcomes and Access for Low-Income Residents

2. Increase Screening and Prevention Services for Children

- 2.A) Expand Existing Screening and Prevention Programs for Low-Income Children
- 2.B) Develop New School/Child Care Partnerships that Expand Screening/Prevention Services and Parent/Caregiver Education

3. Facilitate Local Policies to Promote Oral Health

- 3.A) Provide Information, Expertise and Support to County and City-Based Oral Health Policy Initiatives
- 3.B) Mobilize Dental/Medical Providers and Community Members as Champions for Local Oral Health Policy Initiatives

4. Promote Expanded Dental Access for Low-Income Children/Adults

- 4.A) Facilitate Medical-Dental Provider Partnership/Collaboration to Promote Oral Health Integration
- 4.B) Highlight and Promote Innovative Programs and Practices that Expand Dental Access



✓ The percent of Yolo Denti-Cal child beneficiaries (1-year) that receive **any dental service** by 2020 is at or above the California average



✓ 6,000 children receive oral health screenings annually by 2020

✓ Decrease in percent of screened children with class II/III decay between 2016 and 2020



✓ 2 new local oral health policies passed by 2020

✓ Decrease in rate of ED Visits with Dental Diagnosis between 2016 and 2020 (adults and children)



Next Steps

- Create oral health program with state funding.
- Steering committee will continue.
- Develop action items.
- Study models to address priorities.
- Present and share plan widely.