## Utilization of Oral Health Services by Medicaid-Insured Adults in Oklahoma, 2012-2013

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**Objective:** To understand the impact of Medicaid dental benefits and availability of providers on utilization of dental services by adults in Oklahoma.

**Data/Setting:** This report summarizes the findings of an analysis of Medicaid dental claims over a 2-year period in Oklahoma, where the Medicaid program provides only a limited emergency dental benefit for eligible adults.

**Design/Methods:** Findings are based on an analysis of enrollment and claims data between January 2012 and December 2013 for Medicaid-enrolled adults 21 years of age and older in Oklahoma.

**Results:** Among the 427,000 Oklahoma's adults insured by Medicaid during all or part of the 2-year study period, only 16% received any dental service and of these, nearly half had only a single dental visit. Men, older adults, Hispanics, American Indians, and rural residents were less likely to receive any dental service compared to women, younger adults, other non-Hispanics, and urban residents. The majority of Medicaid adults who accessed services in a dental office or clinic received a surgical treatment service (62%). About 60% of dentists billing Medicaid for services treated less than 50 adults, mainly in dental offices or clinics in urban areas. In 11 rural counties, there were no dentists providing services to Medicaid adults.

**Conclusions:** The limited emergency dental benefit for Medicaid adults in Oklahoma appeared to impact utilization of oral health services, with 84% Medicaid-insured adults in the state not receiving any dental service over the 2-year study period; elderly, racial/ethnic minorities, and rural residents were less likely than other Medicaid eligibles to receive oral health services. The limited emergency dental benefit is also likely responsible for the finding that the majority of Medicaid adults who accessed care in a dental office or clinic received a surgical treatment service, such as extraction or surgical removal of a decayed tooth. More research is needed to compare and contrast state-specific utilization patterns of adults based on the extent of coverage provided by the adult Medicaid dental benefit. Research findings could inform strategies to develop alternative models of care designed to provide cost-effective oral health services and improve the oral health outcomes of adults on Medicaid.

Key Words: Oklahoma, Medicaid, Oral Health, Dentistry

## **HWRC Website Link:**

http://www.oralhealthworkforce.org/wp-content/uploads/2015/12/OK Medicaid 2015.pdf