



Children's
Oral Health
Network
of Maine

2021 DENTAL CLAIMS DATA UPDATE

2016-2021 TRENDS

DENTAL SERVICES AMONG CHILDREN WITH MAINECARE AND COMMERCIAL DENTAL BENEFITS

KEY HIGHLIGHTS

1. About 3 out of 10 children and youth in Maine under age 21 had either no dental coverage in 2021 or had MaineCare or commercial dental benefits for only part of the year. This represents a sizable increase in the percentage of children with consistent dental coverage in 2021 (66%) when compared to 2020 (58%).
2. Prevention utilization rates remained steady or increased slightly when compared to 2020. 4 out of 10 children who were consistently insured by MaineCare, and 6 out of 10 children who were consistently insured with commercial dental benefits, had at least one preventive dental claim in 2021.
3. Disparities in care based on insurance type vary across the state; counties with the highest rates among privately-insured children tend to have the lowest rates among publicly-insured children.
4. Prevention utilization rates for 2021 for insured children have not recovered to pre-pandemic rates.

Introduction

Dental disease is the most widespread chronic disease in children with 40% of children ages 2-19 experiencing dental caries.^{1,2} A 2023 report released by the American Academy of Pediatrics states that although dental visits rates in the U.S. are increasing across all ages, race and geographic categories, significant disparities still exist in children accessing dental care. Barriers to families accessing routine dental care include lack of insurance, fear, distance, poverty, and non-English-speaking households.²

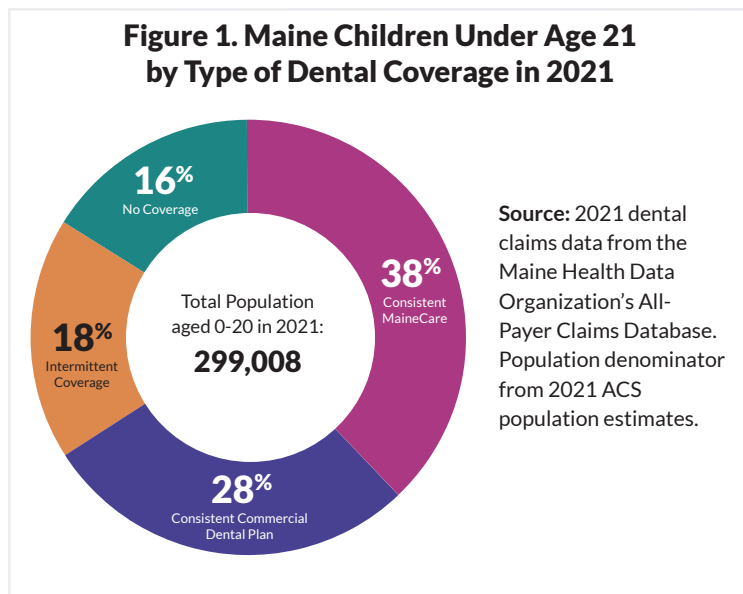
Dental disease is driven by a combination of environmental, physiological, genetic, and behavioral factors and is largely preventable with early intervention.³ If left untreated, dental disease can result in pain, inflammation, infection, impaired speech, and nutritional deficits. Children with dental

caries also experience more missed school days and lower academic performance when compared to their peers.⁴

This annual data brief explores dental coverage and dental claims data from the Maine Health Data Organization's All-Payer Claims Database for children under age 21 who were covered by MaineCare or commercial dental insurance. MaineCare covers comprehensive dental benefits for children under age 21, based on federal Early and Periodic Screening, Diagnosis and Treatment requirements, and the American Academy of Pediatric Dentistry's periodicity schedule.⁵ Commercial insurers generally follow similar standards; however, covered procedures vary by insurance plan (see Method Notes for a description of the data source and analysis parameters).

Dental Coverage

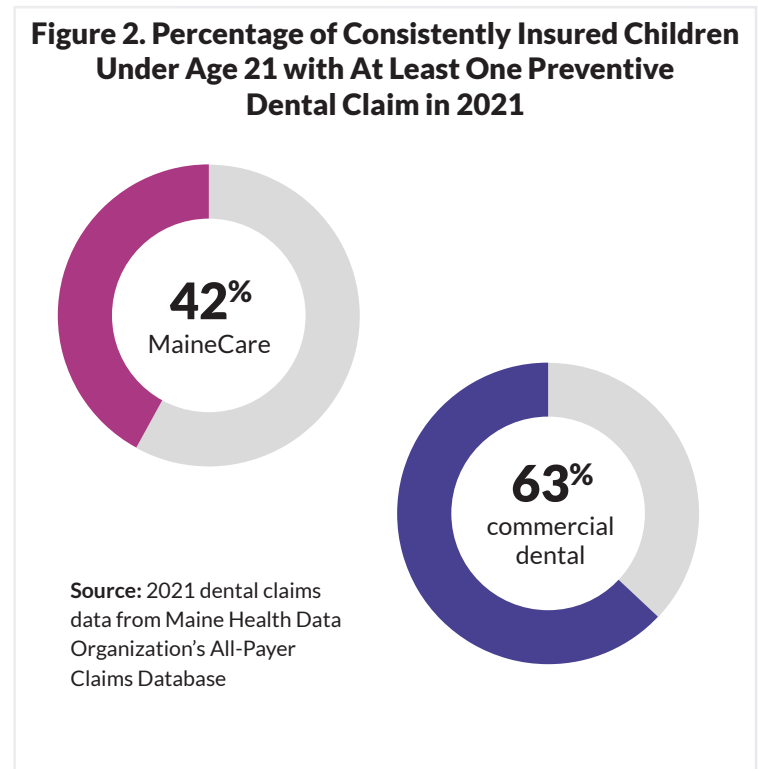
To prevent and treat dental disease, routine access to dental care is necessary. For many families, dental insurance helps increase access to dental care. As seen in **Figure 1**, approximately 38% of children under the age of 21 had MaineCare for at least 11 months in 2021, while 28% were consistently enrolled in a commercial dental plan. Additionally, approximately 18% had either MaineCare or a commercial dental plan for part of the year (less than 11-months). Approximately 16% of Maine children had neither MaineCare nor commercial dental benefits during 2021 (note: within this no-coverage category there may be some children who had benefits with a small dental plan that is under the threshold for the requirement to submit claims data to Maine Health Data Organization.)



Preventive Dental Care

**Note: The following analysis is limited to children continuously enrolled in a commercial dental plan or MaineCare for at least 11 months in 2021.*

Utilization of preventive services varies by insurance type. As seen in **Figure 2**, a higher percentage of children under age 21 with consistent commercial dental benefits (63%) had at least one preventive dental claim in 2021 than children with consistent MaineCare (42%).



RESOURCES / Weblinks for more information about MaineCare dental benefits, claims data, and other oral health data:

Maine Health Data Organization All-Payer Claims Database: mhd.o.maine.gov/claims.htm

MaineCare Benefits Manual, Chapter II – Specific Policies by Service. Section 25: www.maine.gov/sos/cec/rules/10/144/ch101/c2s025.docx

MaineCare Benefits Manual, Chapter III – Allowances for Services. Section 25: www.maine.gov/sos/cec/rules/10/144/ch101/c3s025.docx

MaineCare Children's Services – Early Periodic Screening, Diagnosis, and Treatment (EPSDT): www.maine.gov/dhhs/oms/provider/children/index.html

KidsCount Maine: datacenter.kidscount.org/data#ME/2/0/char/0

Centers for Disease Control and Prevention Oral Health Data: www.cdc.gov/oralhealthdata/

Association of State and Territorial Dental Directors: www.astdd.org/data-collection-assessment-and-surveillance-committee/

American Dental Association Health Policy Institute: www.ada.org/en/science-research/health-policy-institute

CareQuest, the State of Oral Health Equity in America, 2021: www.carequest.org/state-oral-health-equity-america-2021

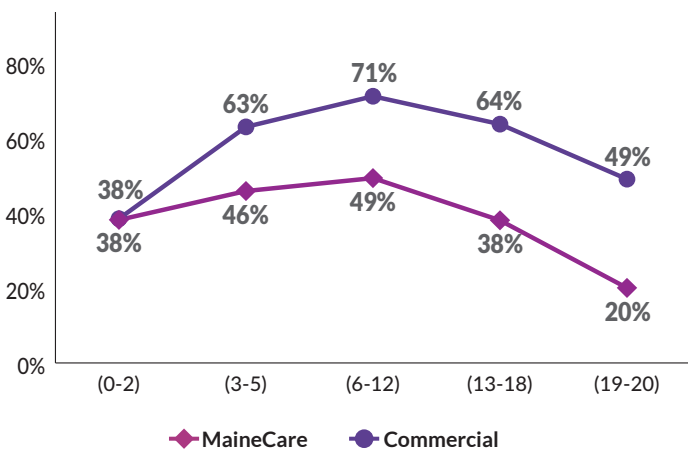
National Institute for Cranial and Dental Research, Oral Health in America: Advances and Challenges, 2021 www.nidcr.nih.gov/oralhealthinamerica

Age and Preventive Dental Care

As seen in Figure 3, across most age groups, a higher percentage of children with commercial dental benefits had at least one preventive dental claim than children with MaineCare. The age group with the highest percentage of children with any preventive dental claims was 6-12 year olds for both MaineCare (49%) and commercial coverage (71%). The 19-20 year old age group demonstrated the largest disparity in preventive claims with a rate of 49% among 19-20 year olds with consistent commercial dental benefits compared to 20% among those with consistent MaineCare.

It is important to note that this data reflects only services that are paid for by either MaineCare or commercial dental insurance plans. Some children receive screening and fluoride varnish through the State of Maine’s School Oral Health Program, or donated care for which providers are not reimbursed. In addition, one preventive dental service within a year is not necessarily an indicator of having consistent access to a dental provider, nor does it mean a child received all recommended routine dental care services.

Figure 3. Percentage of Children that Received Any Preventive Dental Care by Age Group

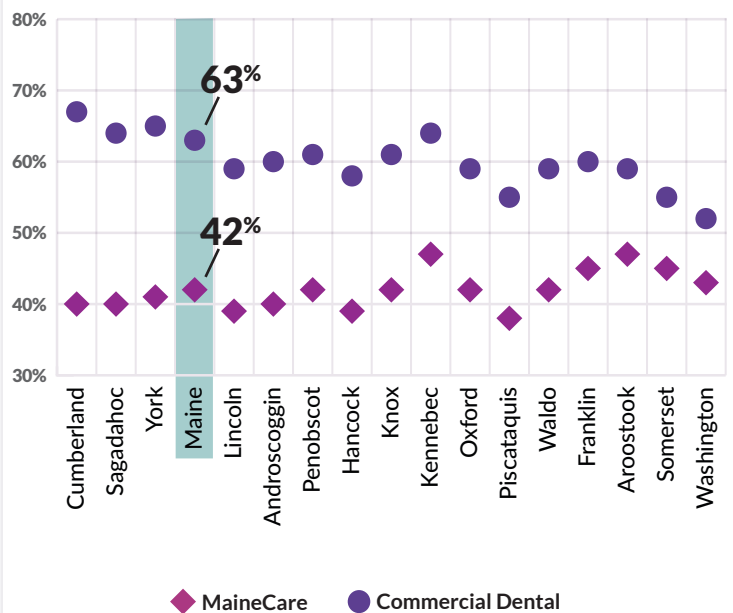


Source: 2021 dental claims data from the Maine Health Data Organization’s All-Payer Claims Database

Preventive Dental Care by County

Preventive claims use varies by county. As seen in Figure 4, in 2021 the largest difference between the percentage of MaineCare and commercially-insured residents was in Cumberland, Sagadahoc, and York counties. Washington, Somerset, and Aroostook counties had the smallest disparities based on insurance. Cumberland County had the highest rate for children with commercial dental insurance receiving preventive care, while Aroostook and Kennebec Counties had the highest rate for children with MaineCare.

Figure 4. Disparities in Preventive Dental Care by County for Children Under Age 21



Source: 2021 dental claims data from the Maine Health Data Organization’s All-Payer Claims Database

Note: graph formatting attributable to the American Dental Association Health Policy Institute’s Dental care use among children (2016). https://www.ada.org/-/media/ADA/Science%20and%20Research/HPI/Files/HPI_Dental_Care_Use_Children_2016.pdf

Author’s Note

The purpose of this document is to help build a common understanding of the status of children’s oral health services, as well as the gaps in these services. Oral health is a complex issue and many partners are working hard to help children get the services they need. Our hope is that this data brief will inspire collective action toward our shared vision: Transforming Maine into a state where all children can grow up free from preventable dental disease.

Utilization And Trends 2016-2021

The trends in dental claims held steady from 2016-2019 with a precipitous drop off in 2020. In 2021, there was a slight rebound, however claims data indicates that dental care utilization is still below pre-pandemic rates. These trends reveal the need for increased collaboration and coordinated effort to address the disparities between children with MaineCare and children with commercial dental insurance and continue the recovery of dental care utilization to match, and hopefully exceed, pre-pandemic rates.

All graphs on this page represent rates among children who had either MaineCare or commercial dental insurance for at least 11 months of the year indicated.

Figure 5. Percentage of Consistently Insured Children Under Age 21 with at least one Preventive Dental Claim in 2016-2021

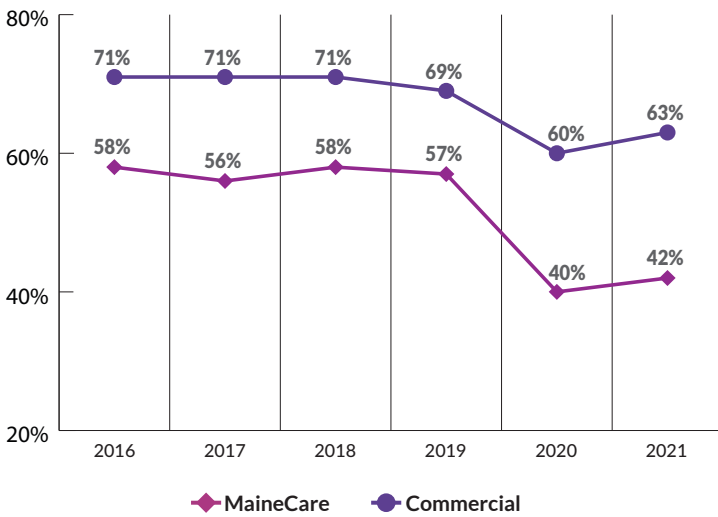


Figure 6. Percentage of Consistently Insured Children Under Age 21 with at least one Dental Claim (any type of dental service) in 2016-2021

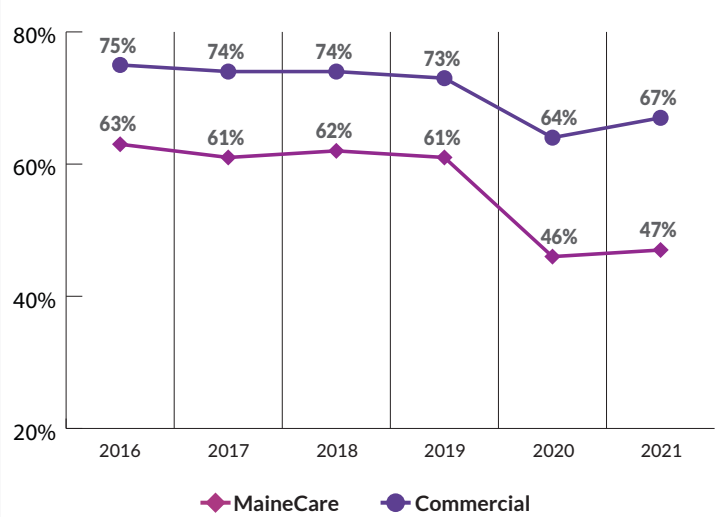


Figure 5, 6, 7, and 8 Source: 2016-2021 dental claims data from the Maine Health Data Organization's All-Payer Claims Database

Figure 7. Percentage of Children with MaineCare with at least one Preventive Dental Claim by age group in 2016-2021

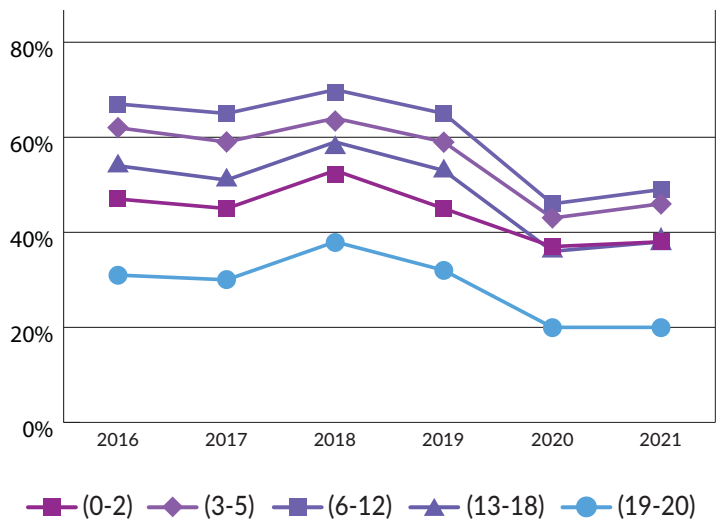
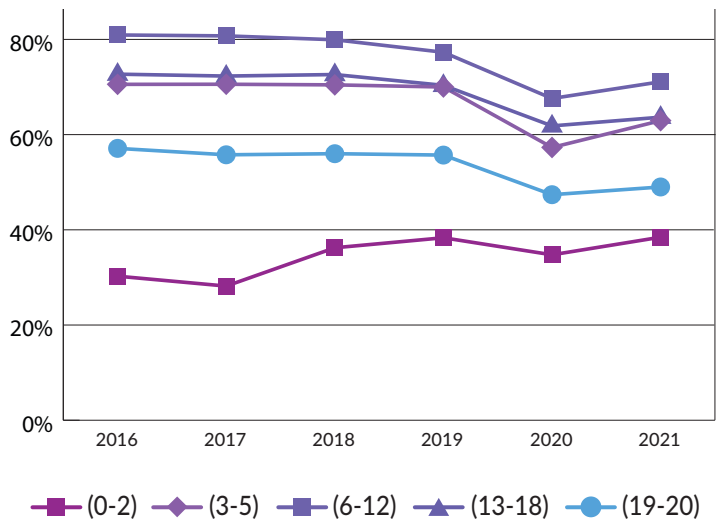


Figure 8. Percentage of Children with Commercial Dental Insurance with at least one Preventive Dental Claim by age group in 2016-2021



Method Notes

Data was obtained from the Maine Health Data Organization's All Payer Claims Database (APCD) per the data release requirements defined in 90-590 C.M.R. ch 120, *Release of Data to the Public*, to provide a snapshot of dental services being delivered in Maine in 2016 through 2021 by insurance type (MaineCare, Commercial), Age (0-21), and location (county).

The Maine Health Data Organization is a state agency that collects healthcare claims data from payors, including Medicaid, commercial insurance carriers, and dental benefit administrators, per the requirements in 90-590 C.M.R. ch. 243, *Uniform Reporting System for Health Care Claims Data Sets*. Please refer to the [MHDO website](#) for more details regarding data restrictions and participating insurers.

Descriptive statistics were analyzed using Excel by the University of Southern Maine's Cutler Institute. The APCD dental claims data used for this brief were limited to individuals who had dental coverage for 11 consecutive months of the year, either with MaineCare or with commercial dental insurance. This was done to capture procedures that are associated with consistently covered individuals as individuals who start with new insurance may not be able to schedule appointments right away. Given that only consistently covered individuals were included, the results do not reflect all individuals with dental insurance that received services in 2016 through 2021.

This analysis includes only services which were covered

by MaineCare or commercial dental insurance plans. It does not include services which were paid for by families, medical insurance, the State of Maine School Oral Health Program, grant-funded programs, or donated care.

The dental services reflected in the data include CPT 99188, which is the code used for fluoride varnish delivered by a medical provider. Additionally the data includes dental services provided by Federally Qualified Health Center and Rural Health Centers that are billed to MaineCare on medical encounter claims.

The denominator for the total population of children ages 0-20 for Figure 1 was derived from the U.S. Census Bureau, 2021 American Community Survey 5-Year Estimates (Table DP05).

The descriptive statistics in these tables represent state averages, county averages, and averages for various age ranges. Age ranges are defined by the following: under age 21 is defined as individuals up to age 20 years 364 days, 0-2: birth until age 2 and 364 days; 3-5: age 3 until age 5 and 364 days; 6-12: age 6 until age 12 and 364 days; 13-18: age 13 until age 18 and 364 days; 19-20: age 19 until age 20 and 364 days.

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The Children's Oral Health Network of Maine unites hundreds of organizations and individuals statewide in a shared vision: ensuring that all children in Maine can grow up free from preventable dental disease. Creating a Maine where no child experiences dental disease demands bold solutions, collective action, and systems changes on many levels. The Network catalyzes collaboration and innovation in order to ensure that effective prevention, education, and treatment tools reach all children in Maine.