

Grade	Points	Criteria
А	4	20% ≤ better than national
В	3	10–20% better than national
С	2	0 to 10% change from national
D	1	10-20% worse than national
F	0	20% ≤ worse than national

Indicator	Desired	TX %	US%	%	Points	Grade
1) Children ages 1-2 enrolled in Medicaid who received a preventive care visit through Medicaid		59.7	25.2	81.27	4	А
2) Children ages 1-17 who have received one or more preventive dental visit in the last year		77.8	79.6	-4.2	2	С
3) Children ages 0-20 enrolled in Medicaid who received preventive dental care through Medicaid		60.6	43.9	32.0	4	А
4)Third Grade students with Caries Experience (treated and untreated tooth decay)*		67.1	51.6	-26.1	0	F
5) Third Graders who have dental sealants in permanent molars*		41.4	38.2	8.0	2	С
6) Children ages 3-5 with Caries Experience (treated and untreated tooth decay)		52.9	27.9	-61.9	0	F
7) Children ages 6-14 enrolled in Medicaid who received dental sealants on permanent teeth through Medicaid		18.7	14.7	24.0	4	А
8) Medicaid providers applying fluoride varnish	↑	4.3	—	_	—	۱*
9) Pregnant women who had their teeth cleaned during pregnancy	↑	33.5	46.3	-32.1	0	F
10) Adults who visited the dentist aged 18-64 within the last year*	↑	60.9	66.4	-8.64	2	С
11) Adults 65+ who have lost all of their natural teeth due to tooth decay or gum disease*	↓	14.0	15.2	8.2	2	С
12) Population with access to optimally fluoridated water (natural or adjusted)	↑	72.0	73.0	-1.4	2	С
13) Needs met in Dental Health Provider Shortage Areas (DHPSA)	↑	43.4	29.3	38.8	4	А
US COMPARISON					2.0	С

* Please see next page for technical notes/comments/disclaimers for specific indicators.

Information provided by the Texas Oral Health Coalition, January 7, 2021

Technical Notes

In June of 2015, TxOHC published a brief Texas Report Card, collating data and "grades" from existing studies and national report cards. For 2017, TxOHC wanted to create a more comprehensive Oral Health Report Card which looks at key areas of oral health in Texas and compares Texas' oral health to the nations.

The 13 indicators were chosen based on the following characteristics:

- Is the data available recent,
- does the indicator show change over time,
- will the indicators increase awareness of the importance of oral health,
- is the indicator meaningful for advocacy and education efforts,
- does the data examine demographic characteristics (such as age, race/ethnicity, income, or education);
- is the indicator tracked at the national level as well as the state level for comparison.

The data percentages were turned into number/letter scores by comparing the Texas data to national data. This national comparison grade was determined using the percentage difference between the Texas and US data percentage. The following percentage difference formula was used to calculate the relative difference between Texas' percentages and the national percentages:

(Current Texas percentage - National percentage) × 100 = Percent difference of Texas from National (Current Texas percentage + National percentage) 2

The percentage difference was then converted into a numerical point value and then converted to a simplified letter grade using table 1. The points for all 13 indicators were then averaged to create a total point value for Texas. That point total was placed on the 4.0 scale scene in table 2 to convert the point total to letter grade.

Additional Comments/Disclaimers for the Following Indicators:

- * The statistic for indicator 4 includes all third graders, both with and without dental insurance who have had treated and/or untreated dental decay at the time of the survey. The state and national data years differ. The most recent Texas State Oral Health Survey (BSS Data) reported to the National Oral Health Surveillance System (NOHSS) is for 2017-2018. Healthy People 2020 uses National Health and Nutrition Examination Survey (NHANES) data that is for 2013-2016.
- * The state and national data years differ. The most recent Texas State Oral Health Survey (BSS Data) reported to the NOHSS is for 2017-2018. Healthy People 2020 uses NHANES data that is for 2013-2016.
- * No national level data is available for indicator 8, so the grade is Incomplete (I).
- * For indicators 10 and 11, crude data is used for both the state and national percentages as age adjusted data is not available on the national level. Crude data has limitations and the population might have unequal age, race/ethnicity, or gender distributions which might account for the differences in the crude rates, (i.e.; confounders have not been adjusted for). The crude rate/prevalence for the nation is not exact and is only the median prevalence for reporting states (all states and DC Median). Though age-adjusted is more accurate, crude and age-adjusted data is not an accurate state to national comparison.

Information provided by the Texas Oral Health Coalition, Inc. _ January 7, 2021

Table 1						
Grade	Points	Criteria				
А	4	20% ≤ better than national				
В	3	10–20% better than national				
С	2	0 to 10% change from national				
D	1	10-20% worse than national				
F	0	20% ≤ worse than national				

Table 2					
Letter Grade	4.0 Scale				
A+	4.0				
А	4.0				
A-	3.7				
B+	3.3				
В	3.0				
B-	2.7				
C+	2.3				
С	2.0				
C-	1.7				
D+	1.3				
D	1.0				
D-	0.7				
F	0.0				

Sources

- 1. Texas Source: Centers for Medicare and Medicaid Services Annual EPSDT Participation Report—Form CMS 416 (State), Fiscal Year 2019. [retrieved [1/7/2021] US Source: Centers for Medicare and Medicaid Services Annual EPSDT Participation Report—Form CMS 416 (National), Fiscal Year 2019. [retrieved [1/7/2021]
- 2. Texas Source: National Survey of Children's Health. NSCH 2018/2019 Data query from the Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. [retrieved [1/7/2021] from www.childhealthdata.org.

US Source: National Survey of Children's Health. NSCH 2018/2019 Data query from the Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. [retrieved [1/7/2021] from www.childhealthdata.org.

- 3. Texas Source: Centers for Medicare and Medicaid Services Annual EPSDT Participation Report—Form CMS 416 (State), Fiscal Year 2019. [retrieved [1/7/2021] US Source: Centers for Medicare and Medicaid Services Annual EPSDT Participation Report—Form CMS 416 (National), Fiscal Year 2019. [retrieved [1/7/2021]
- Texas Source: CDC State Oral Health Survey. "Percentage of students with Caries Experience (treated or untreated tooth decay), Breakdown Grade: Third Grade for 2017-2018." [retrieved [1/12/2020] URL: https://nccd.cdc.gov/oralhealthdata/rdPage.aspx?rdReport=DOH_DATA.ExploreByTopic&islTopic=&islYear
 US Source: Healthy People 2020 OH-1.2: Reduce the proportion of children aged 6 to 9 years with dental caries experience in their primary and permanent teeth. [retrieved [1/13/2020] https://www.healthypeople.gov/2020/data-search/Search-the-Data#objid=4993;.
- Texas Source: CDC State Oral Health Survey. "Percentage of students with dental sealants on at least one permanent molar tooth, Breakdown Grade: Third Grade for 2017-2018." [retrieved [1/13/2020] URL: <u>https://nccd.cdc.gov/oralhealthdata/rdPage.aspx?rdReport=DOH_DATA.ExploreByTopic&islTopic=&islYear</u>.
 US Source: Healthy People 2020 OH-12.2 Increase the proportion of children aged 6 to 9 years who have received dental sealants on one or more of their permanent first molar teeth, 2013-2016 [retrieved [1/13/2020] https://www.healthypeople.gov/2020/data-search/Search-the-Data#objid=5001;.
- Texas Source: CDC State Oral Health Survey. Percentage of students with Caries Experience (treated or untreated tooth decay), Breakdown Grade: Head Start. [retrieved [4/29/2021] <u>https://nccd.cdc.gov/oralhealthdata/rdPage.aspx?rdReport=DOH_DATA.ExploreByTopic&islTopic=&islYear</u>.
 US Source: Healthy People 2020 OH-1.1: Reduce the proportion of children aged 3 to 5 years with dental caries experience in their primary teeth. [retrieved [1/7/2021] <u>https://www.healthypeople.gov/2020/data/Chart/4992?category=1&by=Total&fips=-1</u>
- Texas Source: Centers for Medicare and Medicaid Services Annual EPSDT Participation Report—Form CMS 416 (State), Fiscal Year 2019. [retrieved [1/7/2021]
 US Source: Centers for Medicare and Medicaid Services Annual EPSDT Participation Report—Form CMS 416 (National), Fiscal Year 2019. [retrieved [1/7/2021]
- 8. Texas Source: AHQP Claims Universe, TMHP; Enc_Best Picture Universe, TMHP; Texas Medicaid Provider Database, HHSC. Prepared by Center for Analytics and Decision Support, Texas Health and Human Services Commission, January 2017 (vp).
- Texas Source: Texas Department of State Health Services PRAMS, "2017 PRAMS Databook Summary" [online]. May 2019. [retrieved 1/13/2020] URL: <u>https://dshs.texas.gov/mch/pdf/2017_PRAMS_DB_summary_tables.pdf</u>
 US Source: Centers for Disease Control and Prevention, PRAMStat, [online]. 2016-2017. [retrieved 1/13/2020] URL: (<u>https://www.cdc.gov/prams/prams-data/mch-indicators/states/pdf/Selected-2016-2017-MCH-Indicators-Aggregate-by-Site_508.pdf</u>)
- Texas Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. BRFSS Prevalence & Trends Data [online].
 2018. [retrieved 1/7/2021]. URL: https://www.cdc.gov/brfss/brfssprevalence/.
 US Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. BRFSS Prevalence & Trends Data [online].
 2018. [retrieved 1/7/2021]. URL: https://www.cdc.gov/brfss/brfssprevalence/.
 2018. [retrieved 1/7/2021]. URL: https://www.cdc.gov/brfss/brfssprevalence/.
- Texas Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. BRFSS Prevalence & Trends Data [online].
 2018. [retrieved 1/7/2021]. URL: https://www.cdc.gov/brfss/brfssprevalence/index.html.
 US Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. BRFSS Prevalence & Trends Data [online].
 2018. [retrieved 1/7/2021]. URL: https://www.cdc.gov/brfss/brfssprevalence/index.html.
- 12. Texas Source: Centers for Disease Control and Prevention, My Water's Fluoride [online]. "Fluoridation Status Report (Texas 2020). [retrieved 1/7/2021]. URL: https://nccd.cdc.gov/DOH_MWF/Reports/Fluoridationstatus-report (Texas 2020). [retrieved 1/7/2021]. URL: https://nccd.cdc.gov/DOH_MWF/Reports/Fluoridationstatus-reports-1/7/2021]. URL: https://nccd.cdc.gov/DOH_MWF/Reports/Fluoridationstatus-reports-1/7/2021]. URL: https://nccd.cdc.gov/DOH_MWF/Reports/Fluoridationstatus-reports-1/7/2021]. URL: https://nccd.cdc.gov/DOH_MWF/Reports-1/7/2021]. https://nccd.cdc.gov/DOH_MWF/Reports-1/7/2021].

US Source: CDC Water Fluoridation Reporting System (WFRS). Percent of population served by CWS that are receiving fluoridated water [online]. 2018. [[retrieved 1/7/2021]. URL: <u>https://nccd.cdc.gov/oralhealthdata/rdPage.aspx?rdReport=DOH_DATA.ExploreByTopic&isITopic=WFR&isIYear=2014&go=GO</u>

13. Bureau of Health Workforce, Health Resources and Services Administration (HRSA), U.S. Department of Health & Human Services, <u>Designated Health Professional Shortage Areas Statistics: Designated</u> <u>HPSA Quarterly Summary, as of September 30, 2020</u> available at <u>https://data.hrsa.gov/topics/health-workforce/shortage-areas</u>. [retrieved 1/7/2021]