



Broward Regional Health Planning Council

Broward Oral Health Quick Facts

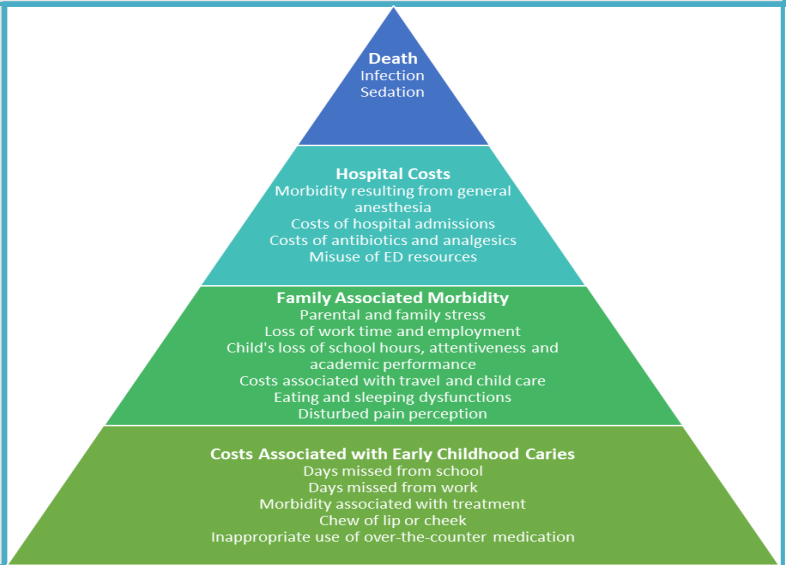


Oral health is vital to overall health. Poor oral health can lead to various poor health outcomes, including malnutrition, speech problems, and infections. Furthermore, poor oral health is associated with diabetes, heart disease and premature birth. Increased poor health outcomes lead to higher utilization of emergency rooms for Ambulatory Care Sensitive oral health conditions (ACS) which are considered to be avoidable conditions when proper preventive measures are taken.

Healthy People 2020 is an initiative to improve the health of all Americans. One of the topics that is emphasized is oral health. Within this topic there are six objectives:

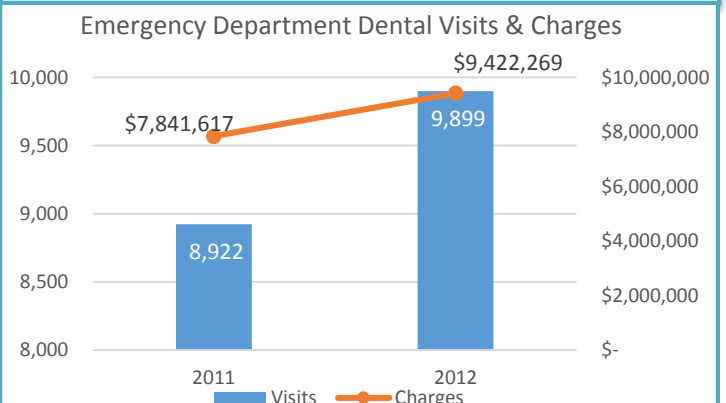
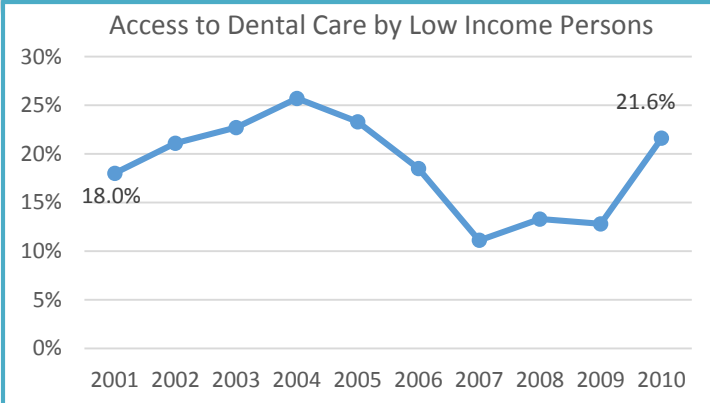
1. Oral health of children and adolescents
2. Oral health of adults
3. Access to preventive services
4. Oral health interventions
5. Monitoring and surveillance systems
6. Public health infrastructure

These objectives strive to avoid the costs, morbidity and other negative outcomes associated with poor oral health.



Source: The Organization for Economic Co-operation and Development, 2013

Access to oral health professionals, as well as dental insurance coverage, are major barriers to good oral health. When looking at dental visits within a year, only 16.1 percent of those without dental coverage made a visit to a dentist within a year, compared to 50.9 percent who have coverage (Improving Access to Oral Health Care for Vulnerable and Underserved Populations, 2011). Many times when people who are not covered need dental care they resort to utilizing the emergency room which is not only more expensive on the patient but it also strains the community as a whole.



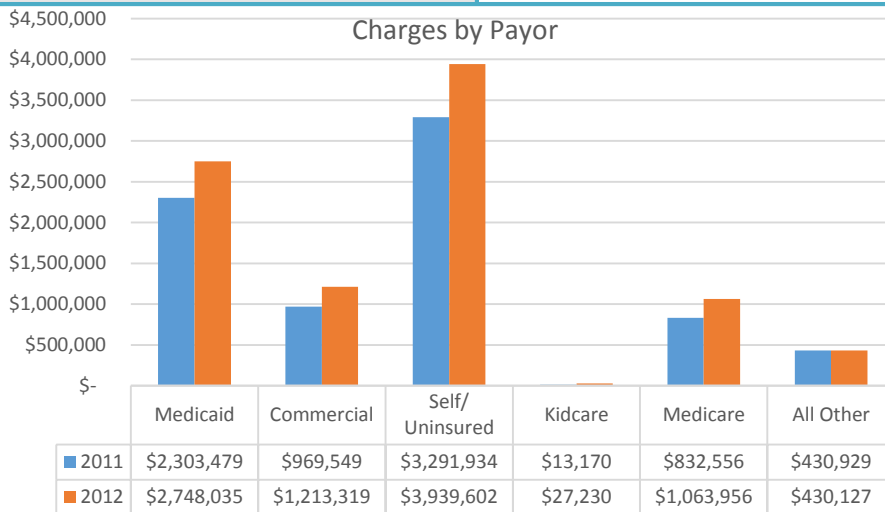
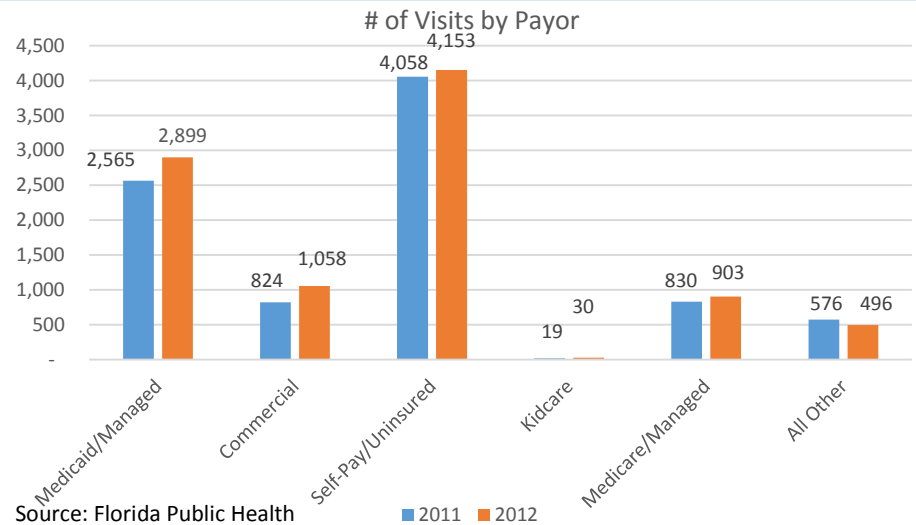
Source: www.floridacharts.com

Source: Florida Public Health Institute, 2014

Although access to dental care had improved as of 2010, there was still high use of emergency departments for use of preventable oral conditions in 2011 and 2012. In fact, visits to ERs increased by over one thousand and charges increased by nearly \$2 million within the year.

In both 2011 and 2012 most of the visits that were made to the ER for oral health conditions were made by patients between the ages of 19 and 34 however each age group experienced an increase in ER visits from 2011 to 2012.

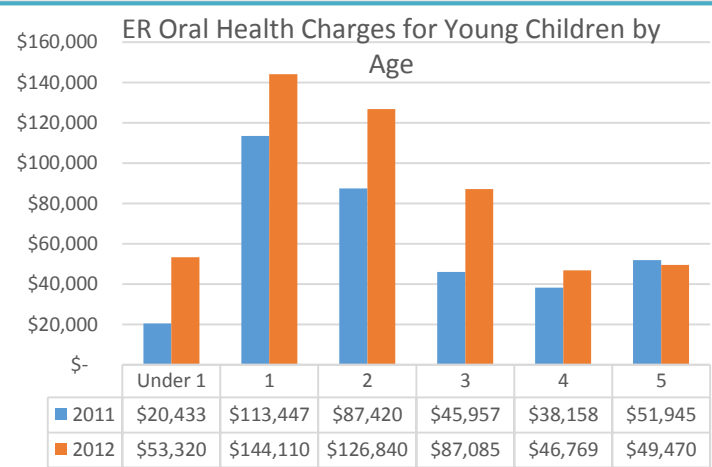
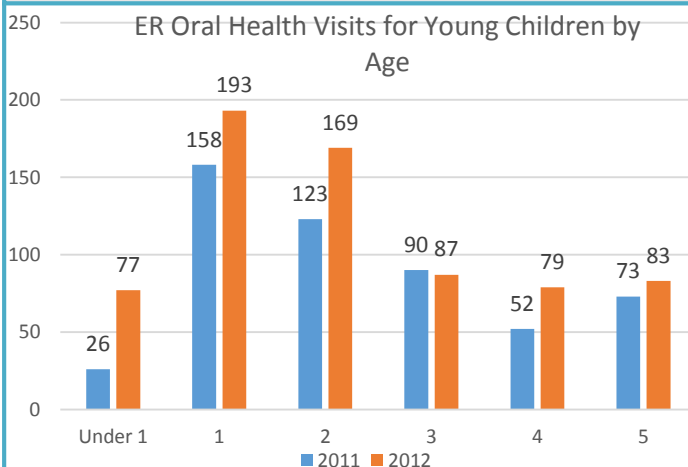
Those who are uninsured/self-pay made the most visits in both 2011 (4,058) and 2012 (4,153). All groups except for "all other" experienced an increase in the number of visits. The largest increase in visits occurred among those using Medicaid, which increased by over 300 visits.



The uninsured/self-pay group had the most charges in both 2011 and 2012. From 2011 to 2012, the charges made to each type of payor, with the exception of "all other", increased. The largest increase occurred in the self-pay/uninsured payor category which increased by over \$600,000.

Source: Florida Public Health Institute, 2014

The number of pediatric ER visits among young children visits made by young children for preventable oral health conditions increased from 522 to 688 from 2011 to 2012. In addition to this charges increased from \$357.360 to \$507.594.



Source: Florida Public Health Institute, 2014