

Dental Services for Children and Parents in the HUSKY Program: An Update for 2014

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KEY FINDINGS

This report on dental care in Connecticut's HUSKY Program suggests that the positive effects of major program changes in 2008 may have run their course. For the first time in recent years, utilization of preventive services and treatment has declined among children who were enrolled in the HUSKY Program for the year.

- **Utilization trends:** For most children and for adults, preventive care and treatment rates in 2014 were lower than 2013.
 - The percentage of **children under 3** who had preventive care declined; however, the rate was still well above the utilization rates reported for 2008 (prior to program changes);
 - The percentages of **children 3 to 19** who had preventive care, treatment, and sealants declined in every age group; however the rates were significantly higher than utilization rates in 2008;
 - Utilization of preventive care by **children in HUSKY B** dropped precipitously in 2014 to a rate well below that for children in HUSKY A;
 - The percentage of **adults 21 and over** in HUSKY A who had preventive care or treatment in 2014 was essentially unchanged from rates for 2012 and 2013 and still well above the rates reported for 2008.
- **Racial/ethnic disparities:** Differences associated with race and ethnicity persist: After years of utilization at the highest rate among children, preventive care utilization fell off for Hispanic children. The difference between utilization rates for adults widened slightly.

These trends are troublesome, especially in view of upcoming coverage changes and cuts to provider reimbursement. Precipitous changes to utilization among Hispanic children are also worrisome. The Department of Social Services and its dental services administrator should conduct additional studies of provider network adequacy, appointment availability, provider willingness, and demand for care. In addition, the Department of Social Services, its contractors, and its community-based partners should work toward keeping eligible children and their parents continuously enrolled as a means of increasing access to preventive dental care.

For the detailed report, please visit ctvoices.org