Do Children’s Preventive Dental Visits Generate Savings for a State Children’s Health Insurance Program?

Volume 23, Number 5, June 2013

“No,” say Lister Hill scholars Bisakha Sen, Justin Blackburn and colleagues. “More preventive visits were associated with fewer subsequent nonpreventive dental visits and lower nonpreventive dental expenditures among children who were continuously enrolled for at least three years in Alabama’s Children’s Health Insurance Program (CHIP). However, more preventive visits did not reduce overall dental or medical (inclusive of dental) expenditures.”

Poor oral health is one of the most common health conditions of childhood in the United States. Dental caries are five times more prevalent than asthma among children ages 5 to 17 years and untreated dental caries can result in emergency department (ED) visits for pediatric dental care and inpatient admissions. Conventional wisdom among the dental and public health communities presumes that preventive dental care is cost-effective and can reduce the need for more expensive ED or inpatient treatment. Relatively little research supports this view and previous studies are limited by their inability to account for unobserved child-specific factors (children’s parents) that may lead children to “select” into using both more preventive and nonpreventive dental care.

The data for this study came from claims processed for Alabama’s CHIP, ALL Kids, from 1998 to 2010. Children who were continuously enrolled for at least three years were included in the analysis to measure one-year lagged nonpreventive dental care and expenditures, and overall dental and medical expenditures. The researchers used an econometric method to minimize selection bias and estimated separate models for children less than 8 years old (about 15,000 children) and those 8 years and older (about 22,000 children).

“Although we did not find that preventive dental visits resulted in overall program cost saving to ALL Kids,” say the researchers, “these visits may be beneficial from a societal point of view when taking into account potential improvements in quality of life of the child enrollees due to fewer oral health problems. At the same time, there is a clear need for continued scientific research into the effectiveness of pediatric preventive dental care so as to better inform public health policy.”

Pediatrics, Vol. 131, No. 6, June 2013, pp. 1107–1113