Fact Sheet: The Untapped Potential of Oral Health Risk Assessments

- **Children’s risk of Early Childhood Caries (ECC) varies widely.** Tooth decay is the most common chronic disease of childhood. Nearly 1 in 5 children has experienced tooth decay by the time she or he enters kindergarten. Although caries — the disease that leads to tooth decay — occurs in all racial, ethnic and income groups, a children’s risk for cavities can vary widely based on various factors.

- **It’s time to move from a “one size fits all” approach to risk-based care.** Dental coverage and dental practices often do not reflect the clinical evidence that preventing and managing ECC requires individually-tailored care that goes beyond the traditional twice-per-year cleanings. This “one size fits all” approach is out of step with American Academy of Pediatrics guidelines, which encourage pediatricians to consider applying up to four yearly treatments of fluoride varnish for children at high risk of ECC. The standard twice-a-year dental visit is also out of sync with the American Academy of Pediatric Dentistry’s (AAPD) guidelines, which call for the periodicity of professional oral health services to be “based on a patient’s individual needs and risk indicators.”

- **Federal Medicaid officials have offered new guidance to states.** The Centers for Medicare & Medicaid Services (CMS) has issued a bulletin clarifying that:
  - Medicaid-enrolled children should be receiving individualized oral health care
  - Clinical guidelines from dental and medical organizations call for care to be based on a risk assessment

CMS’s bulletin reaffirms a core Medicaid principle that a child should get the health care they need, when they need it, and in the appropriate setting. This CMS document, coauthored by the Children’s Dental Health Project, identifies specific steps states can take to incentivize care based on a child’s level of risk for tooth decay.

- **Increasing the number of children receiving an oral health risk assessment can help put them on a path of good oral health.** Assessments play a crucial role because they can help medical/dental providers align preventive care with a child’s individual needs:
  - The AAPD explains that oral health risk assessments help dental professionals make decisions about treatment “based upon caries risk.” This assessment can be conducted by various health professionals, and it uses a series of questions to gauge a child’s individual risk for ECC.
  - Growing evidence suggests that risk assessments can improve oral health, including this California study. Various risk assessment tools have been created for this purpose. Experts recommend conducting risk assessments for children and their parents before age 1 to identify patients who need additional care.
  - According to the Dental Quality Alliance, assessments not only guide patient care, but also positively impact “quality improvement, benefit design and payment.”
  - CMS’s Child Core Set includes a measure of dental sealants based on risk level and becomes mandatory in 2024—all the more reason for states to incorporate risk assessment as a standard component of care.