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More Dental Insurance: Enough Dental Care?

A Supply and Demand Analysis of Colorado's Medicaid Program

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Introduction

More than 130,000 lower-income adults who are enrolled in Medicaid – and hundreds of thousands more after that – are about to gain dental benefits. But when many of these Coloradans try to see a dentist, it will be access denied.

Earlier this year, Colorado legislators voted to add dental benefits for adults in Medicaid, the joint state-federal insurance program, expanding coverage that historically had been limited to children and adolescents. In addition, Colorado lawmakers increased the number of people who will be eligible for Medicaid by setting higher income limits.

Together, these two health policy decisions will result in a projected 844,000 Coloradans enrolled in Medicaid by 2016, all with dental benefits. This represents an increase of 143 percent from the 348,142 Medicaid enrollees with dental benefits in 2012.[1]

The Colorado Health Institute set out to determine if the state's dental workforce is up to the challenge of caring for this influx of Medicaid enrollees with dental benefits. The short answer is that where you live will determine what dental care, if any, will be available.

High-level findings of the study show that:

- Some areas of Colorado are clearly "dental deserts." Eight counties do not have a dentist offering care. And another nine counties do not have a private practice dentist who accepts Medicaid or a Federally Qualified Health Center that is required to provide dental care. Bottom line: Medicaid enrollees in 17 of Colorado's 64 counties do not have access to dental care in the county where they live.
- Statewide, one of three private practice dentists accept Medicaid, but there are wide local and regional variations. In a number of "hot spot" regions, Medicaid enrollees must travel great distances to see a dentist. Enrollees in other counties may have less trouble finding a private practice dentist or safety net clinic.
- To encourage more private practice dentists to accept Medicaid, Colorado has increased reimbursements and is cutting red tape. Practices employed by other states may also suggest ways to improve access to dental care.

This report is intended to provide data and analysis that can help policymakers and advocates working to improve access to dental care in Colorado make strategic and evidence-based decisions.

Colorado has already demonstrated leadership in offering Medicaid enrollees the opportunity to improve their dental health. Now, it's up to public and private partners to close the gap between the promise of better oral health and the availability of care.

The Colorado Health Institute Analysis:
Methodology and Considerations

The passage of Senate Bill 242 in 2013 extends limited coverage for preventive and restorative dental services to adult Medicaid enrollees starting in mid-2014.[2] Lawmakers also voted to expand Medicaid eligibility as part of the Affordable Care Act.

These two legislative actions prompted the Colorado Health Institute to undertake an analysis of Colorado's dental workforce. The analysis is based on a pair of county-by-county calculations. First was an estimate of the number of Medicaid enrollees who will have dental benefits in mid-2014 and in 2016, when expanded enrollment will be in full swing. Then, a count was taken of the number of private practice dentists; the number of those dentists who accept Medicaid; and whether a Federally Qualified Health Center (FQHC) provides dental services. The analysis does not take into account a possible expansion of the dental workforce or dental providers in the Medicaid network. The formulas are shown in Box 1.

These data give an idea of the overall supply of dental services in each county and how much of that supply is available to Medicaid enrollees.

Due to data limitations, these counts assume that all private practice dentists who accept Medicaid are providing the same amount of patient care and treating the same number of enrollees. But this is not the case. For example, in fiscal year 2012-13 more than 84 percent of Colorado's Medicaid clients were served by 25 percent of the dentists who provided Medicaid services.[3] Additionally, limiting safety net clinics to FQHCs does not reflect dental services that may be provided by other organizations. The Colorado Health Institute included only private practice dentists and FQHCs due to the consistency of available data.

Lastly, county-level analyses do not take into account the willingness or ability of Medicaid enrollees to travel for dental care. The data show only enrollment and the ratio of enrollees to providers in a specific county. And the Colorado Health Institute made no assumptions about how Medicaid enrollees may seek or use dental services.

A full accounting of the methodology and data sources can be found in the data chapter.

Box 1. Understanding the Dental Data

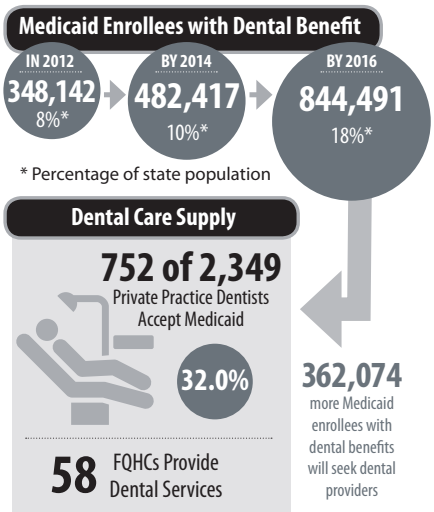
The following graphic shows Colorado numbers and averages. County-level data are available in the accompanying data supplement.

Medicaid Enrollment:

- Estimated number of Medicaid enrollees with dental benefits in 2012 and 2014 and the projected 2016 enrollment.
- Medicaid enrollees with dental benefits as a percentage of the state population.
- The projected increase in the number of Medicaid enrollees with dental benefits from 2014 to 2016.

Medicaid Dental Care:

- Number of private practice dentists who accept Medicaid.
- Number of all private practice dentists.
- Percentage of private practice dentists accepting Medicaid.
- Number of Federally Qualified Health Centers (FQHCs) with dental services.



Results

Where You Live Matters

Across Colorado, there is wide variation in the availability of dentists or clinics offering dental services.

For Coloradans with Medicaid benefits, finding a dentist willing to accept their insurance can be formidable. Some counties have no dentists at all. Others have no private practice dentists who take Medicaid.

And as more Medicaid enrollees gain dental insurance, dental care will be even harder to come by.

These findings are detailed in sections, organized by:

- *Access to a Dentist*
- *Medicaid Provider Network*
- *2014 Hot Spots*
- *Preparing for 2016*

Oral Health in Colorado

The Roles of Care and Coverage

Oral health care and dental insurance coverage may influence overall oral health status. Coloradans without dental insurance, as well as those who have not visited a dental professional, are more likely to rate their oral health as fair or poor. Low-income Coloradans are disproportionately represented among those reporting fair or poor oral health – more than 60 percent.[4]

Many factors influence whether a person seeks oral health care, including social and cultural influences and personal preferences.[5] Cost is another factor. Lower-income Coloradans pass up oral health care at rates above the state average, often citing cost.[6]

People are more likely to seek dental care if they have dental insurance.[7] Extending dental benefits to Medicaid enrollees may increase the use of dental care. The new annual Medicaid dental benefit of $1,000 for covered services[8] will, to some extent, ease financial concerns that keep people from seeking care. Still, some adult enrollees may have needs that push treatment costs beyond the cap.

Oral Health Glossary

- **Private practice dentists** An actively practicing licensed dentist who is not employed by a Federally Qualified Health Center. A dentist was counted as practicing in a county if he or she reported working at least one day per week or four days per month. If a dentist reported working more than four days per month in more than one county, he or she was counted once in each county.

- **FQHCs** The acronym stands for Federally Qualified Health Centers. FQHCs are funded by the federal government and, under special reimbursement arrangements with Medicaid, provide care to low-income and uninsured persons. FQHCs are mandated by federal law to provide dental care.

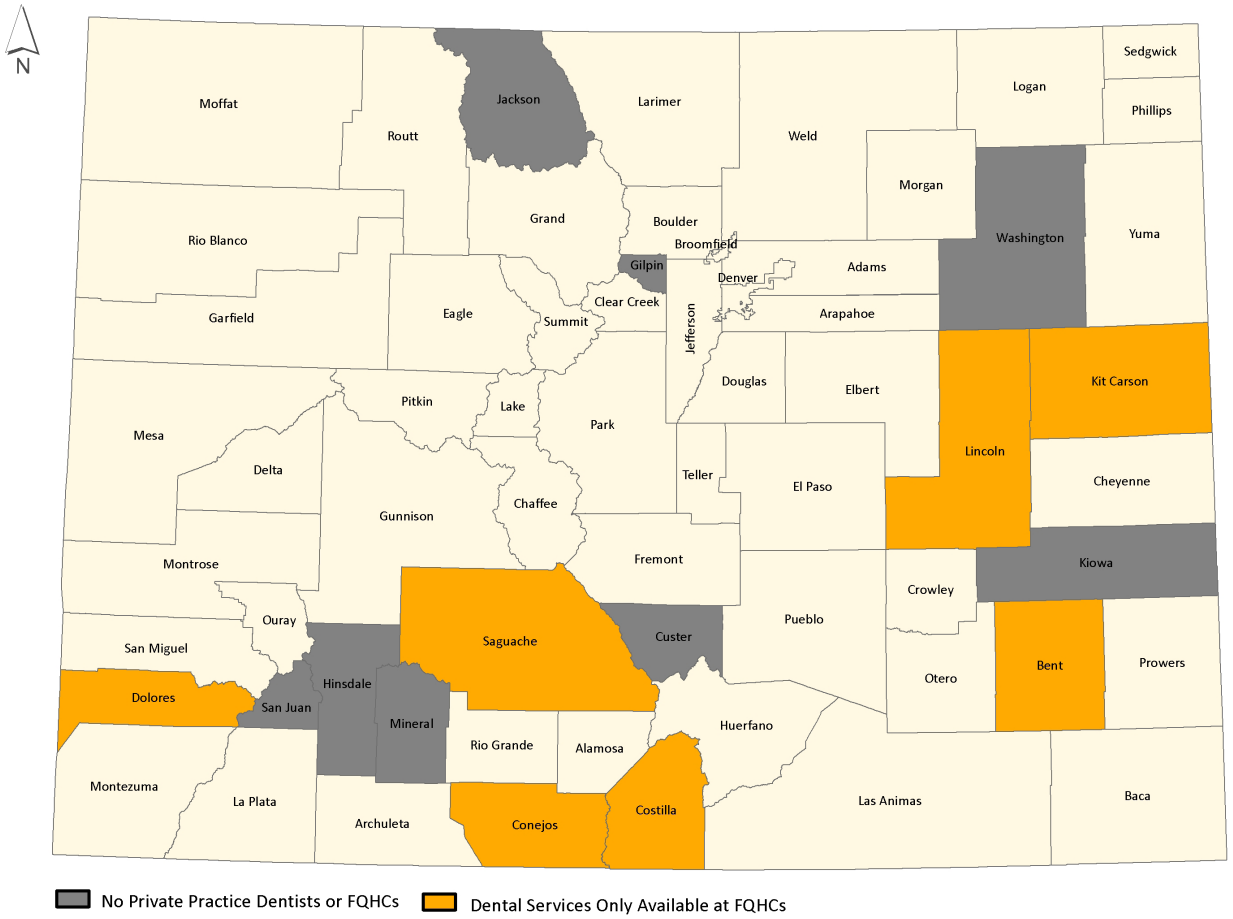
Access to a Dentist

Overall, the state of Colorado ranks 16th in the total number of professionally active dentists nationwide and stands above the national average of dentists providing clinical care per 100,000 population.[9,10]

In more detail, approximately 2,350 private practice dentists are providing care in Colorado. These dentists are practicing outside of FQHCs and may be working in more than one location or county. Colorado has roughly 1,968 residents under the age of 65 for each practicing dentist. In Colorado counties with a private practicing dentist, the ratio ranges between a low of 1,253 residents for each dentist in Archuleta to a high of more than 5,200 residents for each dentist in Otero and Crowley counties.

Eight Colorado counties - Jackson, Washington, Kiowa, Custer, San Juan, Hinsdale, Mineral and Gilpin - have no dental services, neither private practicing dentists nor FQHCs. This situation creates significant treatment barriers for residents with or without dental insurance. These counties make up a relatively small percentage of Colorado's total population (0.4 percent, or approximately 20,000 residents). Federally Qualified Health Centers are the only sources of dental services in another seven counties (see Map 1.)

Map 1. Colorado Counties with Limited Access to Dentists, 2013

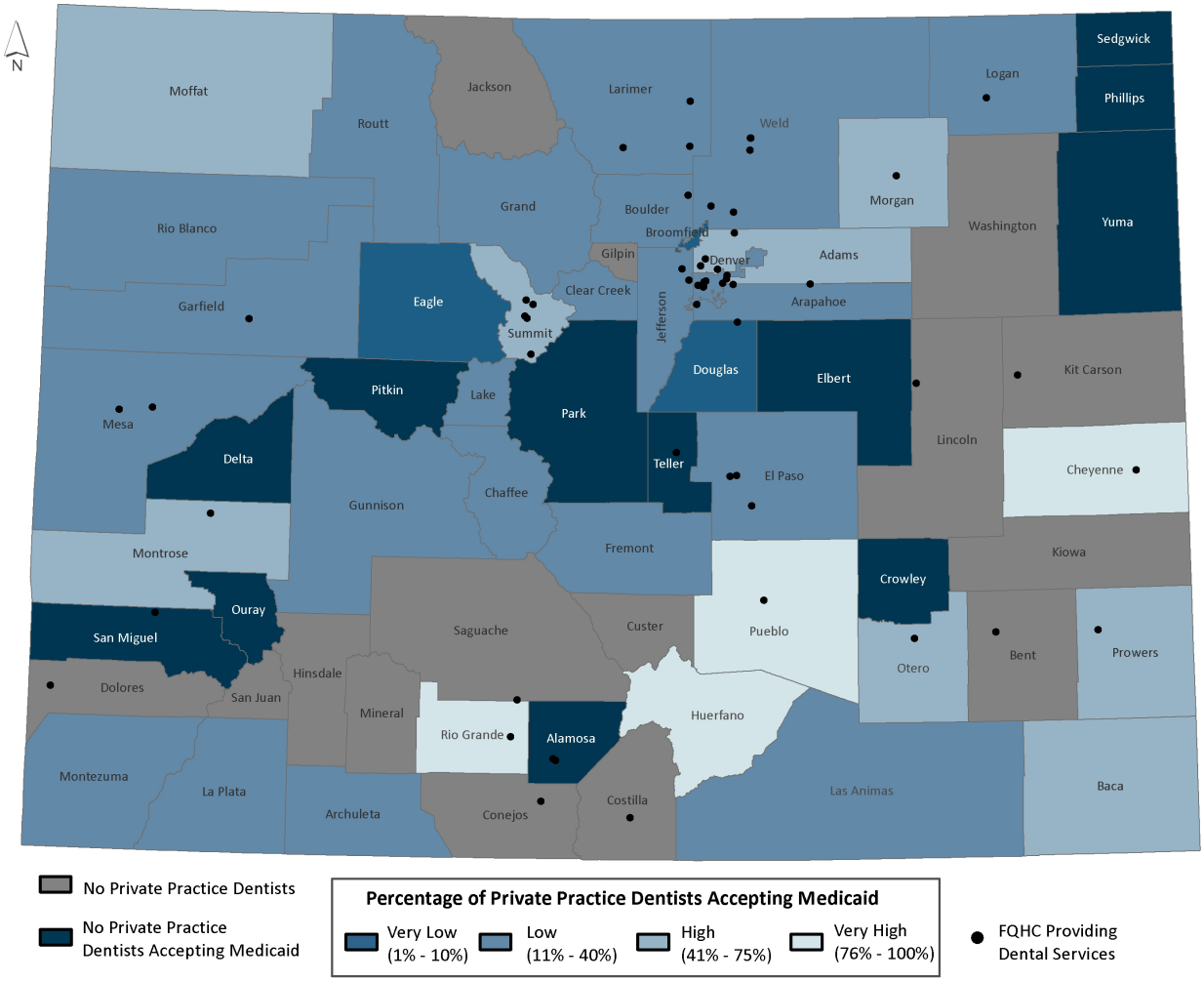


* Sources and notes on inside back cover

Medicaid Provider Network

Nearly one of three, or 32 percent, of the private practice dentists in Colorado treat Medicaid enrollees. However, this number masks significant local variation. Map 2 shows the range in the percentage of private practice dentists accepting Medicaid across the state and the location of FQHCs providing dental services. Nine Colorado counties – Crowley, Delta, Elbert, Ouray, Park, Phillips, Pitkin, Sedgwick and Yuma – have no FQHC and no private practice dentists accepting Medicaid.

Map 2. Percentage of Private Practice Dentists Accepting Medicaid, by County, 2013



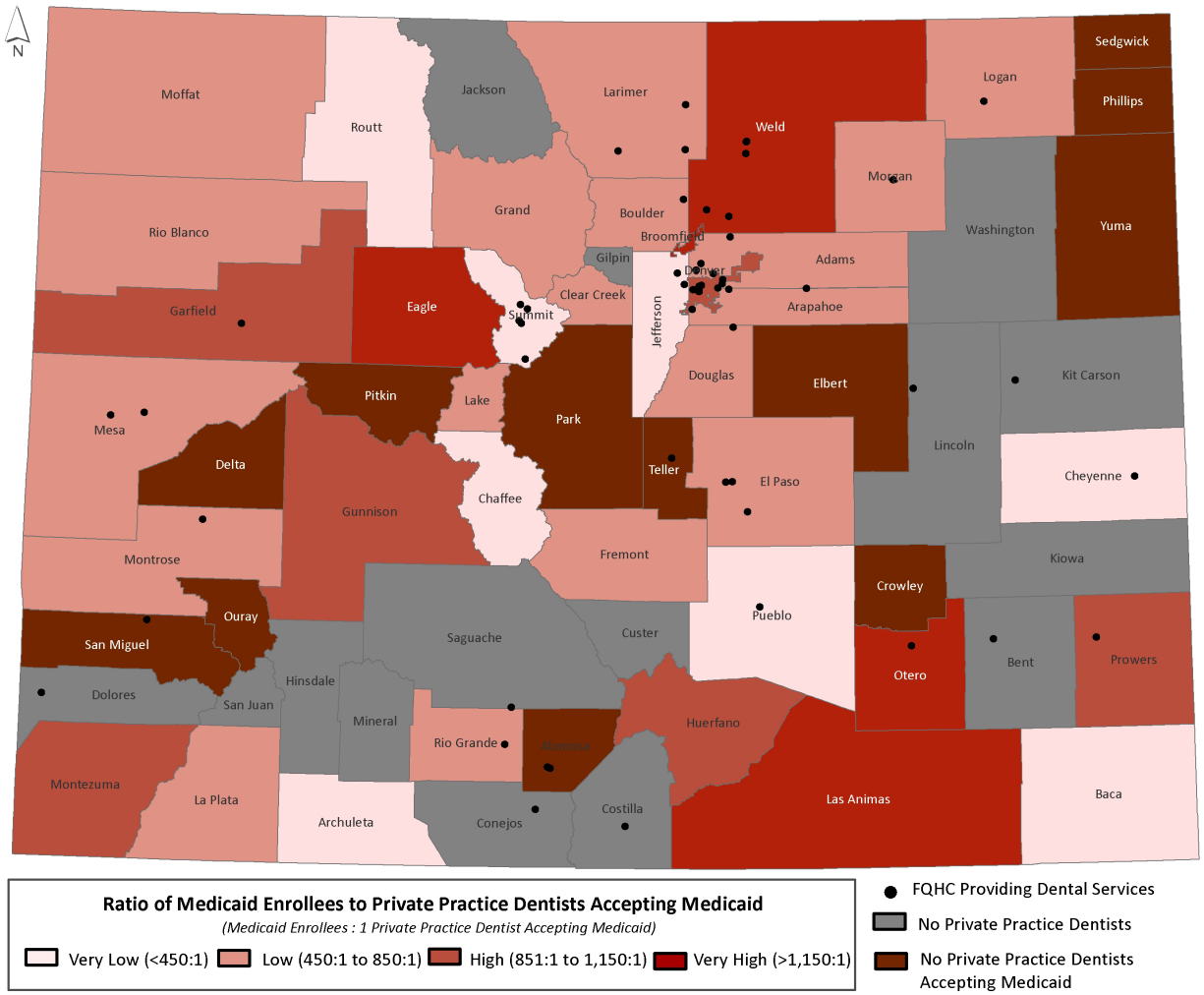
* Sources and notes on inside back cover

In total, Medicaid enrollees in 17 Colorado counties do not have a local source for dental care. Eight do not have a dentist offering care. And another nine do not have a private practice dentist who accepts Medicaid or a Federally Qualified Health Center that is required to provide dental care. About two percent of Medicaid enrollees live in these counties.

When SB 242 is implemented, there will be, on average, approximately 642 current Medicaid enrollees with dental benefits for each private practice dentist accepting Medicaid. But a closer look reveals stark differences among counties (see Map 3).

The ratio will increase to 1,123 enrollees to one provider by 2016. Assuming no increase in private practice dentists accepting Medicaid, the number of Medicaid enrollees to providers who accept the insurance in 2016 will range from 360 to one in Cheyenne County to more than 6,000 to one in Eagle County.

Map 3. Ratio of Medicaid Enrollees to Private Practice Dentists Accepting Medicaid, by County, 2014



* Sources and notes on inside back cover

2014 Hot Spots

By mid-2014, the number of enrollees with dental coverage will increase by nearly 40 percent statewide. Medicaid enrollees in several "hot spot" regions, specifically counties in northeast Colorado and across the south and southwest, will need to travel great distances to obtain dental care. CHI defines hot spots as regions with several adjacent counties that have limited Medicaid or no dental care and enrollments that are above the state average.

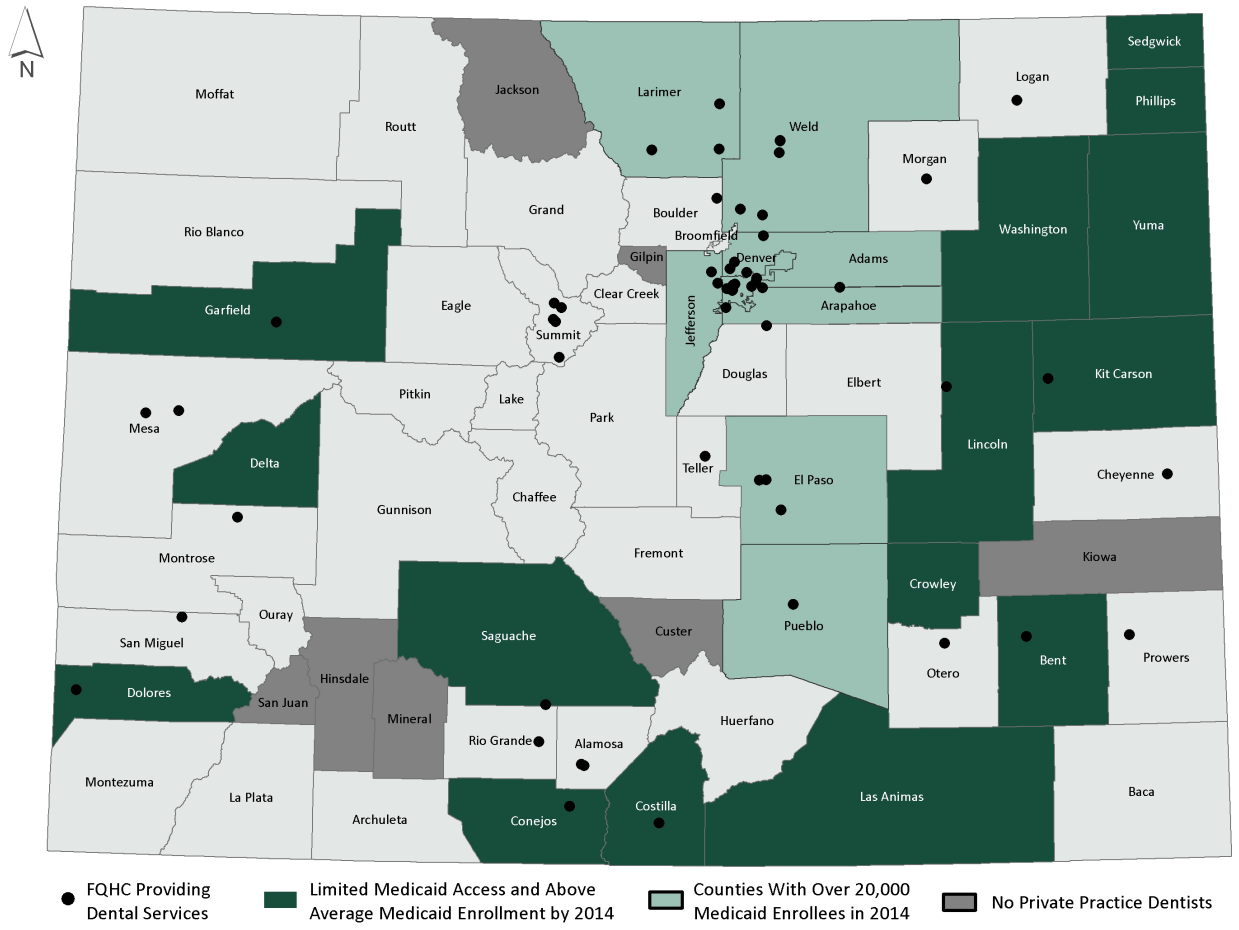
Fifteen counties will have above average Medicaid enrollment but relatively limited access to private practice dentists who accept the insurance or FQHCs providing care (see Map 4). These counties include less populous counties like Sedgwick as well as relatively larger counties such as Delta and Garfield.

Enrollees in the "hot spot" regions may need to travel across several counties to reach a clinic or dentist. The few clinics and private practice dentists available to Medicaid enrollees in these regions may be challenged to meet the increased demand for dental services.

Eight additional counties will each have more than 20,000 Medicaid enrollees and together make up 76 percent of enrollees statewide. Unlike the "hot spot" regions, these counties do not meet the criteria for limited Medicaid access. However, the volume of enrollees may quickly overwhelm the available providers.

These counties vary in the percentage of private

Map 4. Counties with Limited Medicaid Access and Above Average Medicaid Enrollment, 2014



* Sources and notes on inside back cover

Brian Clark/CHI

practice dentists accepting Medicaid; the ratio of enrollees to providers; and the availability of FQHCs with dental services. Denver, El Paso and Weld counties, for example, have enrollee-to-provider ratios above the state average. Of these eight counties, Jefferson has the lowest percentage of private practicing dentists accepting Medicaid, with less than one in four (23.9 percent).

A few counties are more balanced in the number of private practice dentists and FQHCs serving Medicaid enrollees. Adams, Cheyenne, Montrose and Pueblo counties appear to have relatively better access to dental care through FQHC clinics as well as private practice dentists accepting Medicaid compared with others in the state. Summit County also has above average participation in Medicaid among its private practice dentists and several FQHCs; however, its Medicaid enrollment will more than double by 2016, placing substantial pressure upon the county's Medicaid dental care supply.

Preparing for 2016

The number of Medicaid enrollees is estimated to increase 75 percent statewide through 2016. Increasing enrollment will exacerbate already limited access to dentists that accept Medicaid, especially in the 2014 "hot spot" regions.

Medicaid enrollment in 18 counties will more than double between 2014 and 2016 (see data supplement). Some of these counties are well below the state rate of private practice dentists accepting Medicaid, including Boulder at 17.9 percent and Broomfield at 3.1 percent. Pitkin County will nearly quadruple its Medicaid enrollment (381 percent), from 240 in 2014 to more than 1,000. The county currently has no FQHCs or private practice dentists accepting Medicaid.

Strategies to open pathways to dental care for new Medicaid enrollees may require time to yield results. Some communities and advocates are already developing plans and programs to prepare for the anticipated increases in enrollment.

Opportunities to Address Access to Dental Care for Medicaid Enrollees

Improve Medicaid

Research points to several reasons why dentists do not participate in Medicaid, including burdensome administrative requirements and low reimbursement.[11,12,13] On average, Colorado's Medicaid payments covered only 58.3 percent of dentists' median retail fees, according to 2008 figures, the most recent publicly available data.[14]

To address these issues, Colorado increased Medicaid reimbursements to private practice dentists by 4.5 percent and to FQHCs by 2 percent in fiscal year 2013-14.[15] Still, rate increases alone are not likely to attract enough dentists into Medicaid.

Some states have kept dentists in the program even during periods of rate cuts by partnering with dentists and dental societies in making program improvements. For example, South Carolina recruited dentists through dental society newsletters, websites and presentations at society meetings. When the legislature proposed cuts in reimbursements, the state's dental association got involved by making recommendations to drop certain procedures from the fee schedule.[16]

Beginning in fiscal year 2014-15, Colorado's Medicaid dental benefit will be run by a third-party administrative services organization (ASO). The ASO will manage provider networks and claims processing as well as outreach and education to enrollees. Measures that streamline paperwork have the potential to persuade additional dentists to accept Medicaid.[17]

Building the Medicaid Oral Health Workforce

As one step toward preparing for the surge of new patients, the Colorado Dental Association has launched the "Take Five" campaign. The goal is for each member to commit to accepting at least five Medicaid enrollees or families into their practices. The dental association has committed to providing resources and support to members who take this pledge in order to make participation in Medicaid as simple and efficient as possible.[18] This effort is an important start, but will need to expand in order to address the sheer numbers of Medicaid enrollees with dental benefits.

Registered dental hygienists will also have a role in improving access. Colorado allows hygienists to provide patient education and prevention services, including application of dental sealants and topical fluorides, without collaboration or supervision by a dentist.[19] These professionals can provide safe, cost-effective preventive care to underserved patients and communities.[20] Understanding whether there are barriers to independent dental hygiene practice, and creating incentives for hygienists to practice independently in settings and locations that serve Medicaid enrollees, may improve access to preventive care.

In addition, advocates are working with health departments, medical providers and schools to develop practical, sustainable models of care. For example, primary care providers and nurse case managers can provide oral health assessments and education, track follow-up treatment and facilitate referrals to dentists.[21] Such efforts are already underway. Cavity Free at Three trains primary care providers to educate parents about dental health and conduct preventive screening for young children.[22] Connecting Medicaid enrollees to primary care medical homes through the Accountable Care Collaborative may put oral health on the radar of more medical providers.

Rural communities unable to recruit and retain full-time dental providers may consider telehealth or a hub-and-spoke delivery model, hosting part-time dental providers in small clinics across a region.

Conclusion

Improving access requires a thorough understanding of the supply of dental care and monitoring changes in demand.

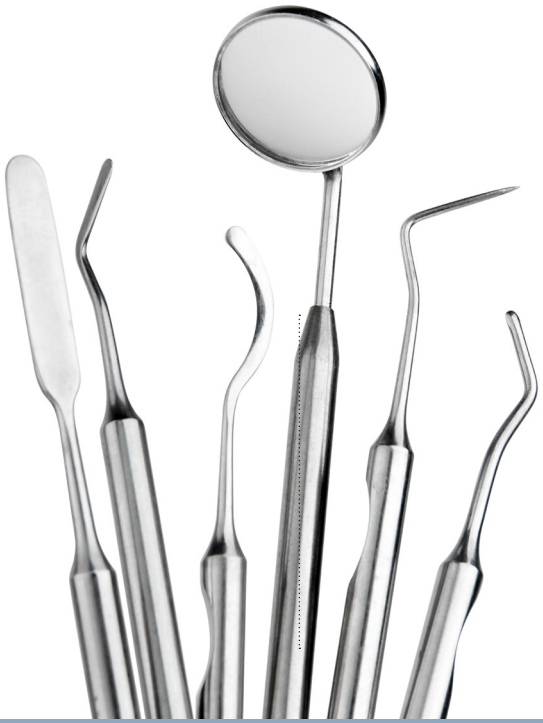
Information on private practice dental providers, including where they treat patients, how many hours they provide direct patient care and how much time, if any, they spend in treating Medicaid enrollees, are all necessary measures to inform current and future workforce planning.

The 2012 passage of House Bill 1052 transfers licensure data for several health professionals, including dentists and dental hygienists, to the Primary Care Office of the Department of Public Health and Environment for public use. It also allows for the Department of Regulatory Agencies to expand provider data collected through the licensure process. These new data will include the practice address of the professional as well as total number of hours spent on patient care.[23]

These changes will help in planning. However, health professionals are not required to provide these data at the time of license renewal, nor do they provide information on the types of insurance they accept.

Current initiatives in Colorado and best practices used elsewhere show promise in improving access. Safety net clinics that treat uninsured adults may be able to expand services as more Coloradans are covered by Medicaid. Significant improvements in access, however, will require much more involvement from private practice dentists and hygienists.

Policies to improve Medicaid, address the oral health workforce and bolster data collection can reinforce efforts to make dental care a reality for more lower-income Coloradans. CHI will continue to monitor Colorado's oral health policies and programs and assess their impact on improving oral health for all Coloradans.



Endnotes

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Map Notes

Map 1. Colorado Counties with Limited Access to Dentists, 2013

Peregrine Medical Quest Database, July 2013.

Federally Qualified Health Center data from Colorado Community Health Network, July 2013. Mobile units or services provided by referral are not included.

Dentists practicing in Hinsdale County do not meet the criteria for practicing dentists (one day per week or four days per month).

Map 2. Percentage of Private Practice Dentists Accepting Medicaid, by County, 2013

Peregrine Medical Quest Database, July 2013.

Colorado Department of Health Care Policy and Financing 2012 Q4 Medicaid Report – Provider Count (Rendered Services).

Federally Qualified Health Center data from Colorado Community Health Network, July 2013. Mobile units or services provided by referral are not included.

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Map 3. Ratio of Medicaid Enrollees to Private Practice Dentists Accepting Medicaid, by County, 2014

Peregrine Medical Quest Database, July 2013

Colorado Department of Health Care Policy and Financing 2012 Q4 Medicaid Report – Provider Count (Rendered Services).

2012 caseload counts for Medicaid enrollees ages 0-64, Colorado Department of Health Care Policy and Financing.

Federally Qualified Health Center data from Colorado Community Health Network, July 2013. Mobile units or services provided by referral are not included.

Dentists practicing in Hinsdale County do not meet the criteria for practicing dentists (one day per week or four days per month).

Map 4. Counties with Limited Medicaid Access and Above Average Medicaid Enrollment, 2014

Limited Medicaid access is defined as having a percentage of private practice dentists accepting Medicaid that is lower than the state average. Above average Medicaid enrollment is defined as having a percentage of the total population ages 0-64 enrolled in Medicaid greater than the state average of 10 percent.

2012 caseload counts for Medicaid enrollees ages 0-64, Colorado Department of Health Care Policy and Financing.

Federally Qualified Health Center data from Colorado Community Health Network, July 2013. Mobile units or services provided by referral are not included.

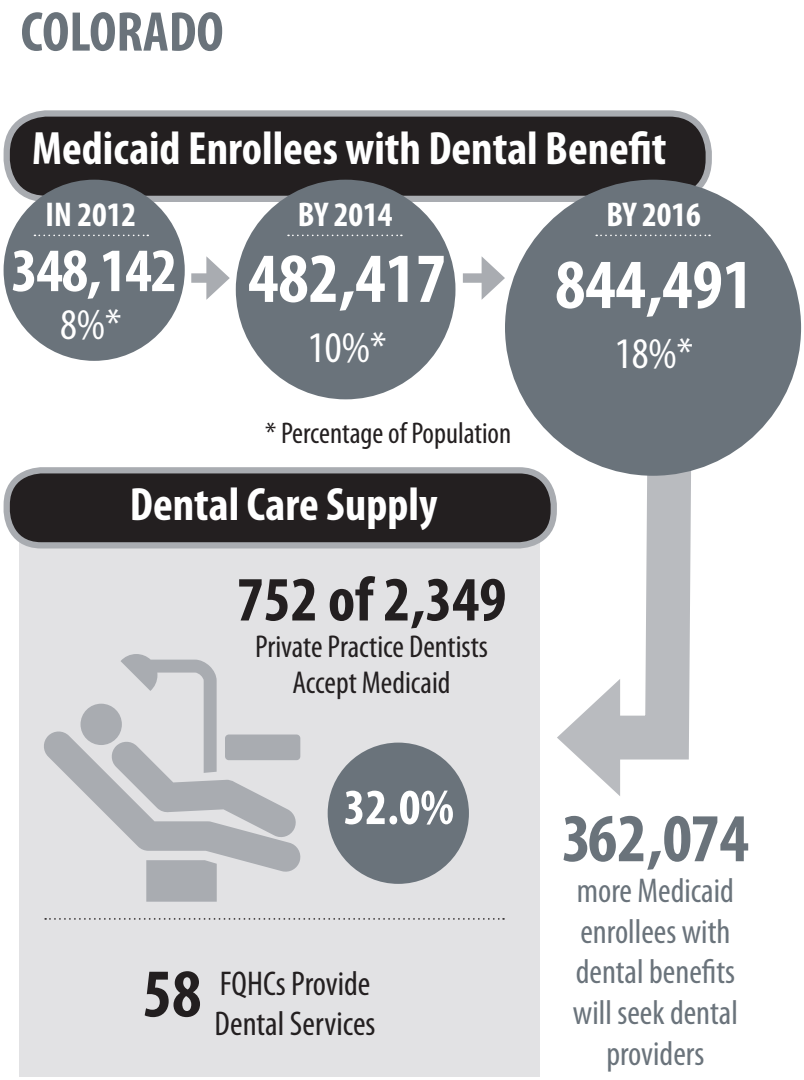
Dentists practicing in Hinsdale County do not meet the criteria for practicing dentists (one day per week or four days per month).

COUNTY-LEVEL DATA

This data supplement provides county-level estimates of the supply of dental care available to Medicaid enrollees.

Data for each county include the number of private practice dentists accepting Medicaid, the percentage of the county's dentists who accept Medicaid, and the number of Federally Qualified Health Centers providing dental services. Also shown are the estimated number of Medicaid enrollees who will have dental benefits in 2012, 2014 and 2016, and estimates for the percentage of the population made up of Medicaid enrollees.

Hinsdale and Mineral counties have enrollment estimates too small to report, indicated by "NA."



ADAMS COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
46,894	61,662	102,645
11%*	15%*	23%*

* Percentage of County Population

Dental Care Supply

119 of 197
Private Practice Dentists Accept Medicaid

60.4%

6 FQHCs Provide Dental Services

40,983
more Medicaid enrollees with dental benefits will seek dental providers

ALAMOSA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,972	2,931	4,552
14%*	21%*	32%*

* Percentage of County Population

Dental Care Supply

0 of 6
Private Practice Dentists Accept Medicaid

0.0%

2 FQHCs Provide Dental Services

1,621
more Medicaid enrollees with dental benefits will seek dental providers

ARAPAHOE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
40,272	54,602	96,236
8%*	10%*	17%*

* Percentage of County Population

Dental Care Supply

117 of 350
Private Practice Dentists Accept Medicaid

33.4%

2 FQHCs Provide Dental Services

41,634
more Medicaid enrollees with dental benefits will seek dental providers

ARCHULETA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
807	1,099	2,060
8%*	11%*	20%*

* Percentage of County Population

Dental Care Supply

3 of 8
Private Practice Dentists Accept Medicaid

37.5%

0 FQHCs Provide Dental Services

961
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage above state percentage

BACA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
253	384	751
9%*	13%*	26%*

* Percentage of County Population

Dental Care Supply

1 of 2
Private Practice Dentists Accept Medicaid

50.0%

0 FQHCs Provide Dental Services

367 more Medicaid enrollees with dental benefits will seek dental providers

BENT COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
477	694	1,208
9%*	13%*	22%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

1 FQHC Provides Dental Services

514 more Medicaid enrollees with dental benefits will seek dental providers

BOULDER COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
13,035	17,653	38,590
5%*	6%*	14%*

* Percentage of County Population

Dental Care Supply

34 of 190
Private Practice Dentists Accept Medicaid

17.9%

1 FQHC Provides Dental Services

20,937 more Medicaid enrollees with dental benefits will seek dental providers

BROOMFIELD COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,551	2,221	4,541
3%*	4%*	8%*

* Percentage of County Population

Dental Care Supply

1 of 32
Private Practice Dentists Accept Medicaid

3.1%

0 FQHCs Provide Dental Services

2,320 more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage above state percentage

CHAFFEE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
830	1,238	2,236
6%*	8%*	15% *

* Percentage of County Population

Dental Care Supply

3 of 8
Private Practice Dentists Accept Medicaid

37.5%

0 FQHCs Provide Dental Services

998
more Medicaid enrollees with dental benefits will seek dental providers

CHEYENNE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
145	184	360
9%*	12%	22%*

* Percentage of County Population

Dental Care Supply

1 of 1
Private Practice Dentists Accept Medicaid

100%

1 FQHC Provides Dental Services

176
more Medicaid enrollees with dental benefits will seek dental providers

CLEAR CREEK COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
295	454	922
4%*	6%*	12%*

* Percentage of County Population

Dental Care Supply

1 of 3
Private Practice Dentists Accept Medicaid

33.3%

0 FQHCs Provide Dental Services

468
more Medicaid enrollees with dental benefits will seek dental providers

CONEJOS COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,006	1,525	2,448
14%*	22%*	34%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

1 FQHC Provides Dental Services

923
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

COSTILLA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
420	637	1,007
15%*	23%*	36%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

1 FQHC Provides Dental Services

370
more Medicaid enrollees with dental benefits will seek dental providers

CROWLEY COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
418	609	1,043
8%*	12%*	22%*

* Percentage of County Population

Dental Care Supply

0 of 1
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

434
more Medicaid enrollees with dental benefits will seek dental providers

CUSTER COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
206	291	540
6%*	9%*	16%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

0 FQHCs Provide Dental Services

249
more Medicaid enrollees with dental benefits will seek dental providers

DELTA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
2,183	3,181	5,638
9%*	13%*	23%*

* Percentage of County Population

Dental Care Supply

0 of 10
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

2,457
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage above state percentage

DENVER COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
59,967	80,603	135,303
11%*	14%*	22% *

* Percentage of County Population

Dental Care Supply

90 of 296
Private Practice Dentists Accept Medicaid

30.4%

7 FQHCs Provide Dental Services

54,700
more Medicaid enrollees with dental benefits will seek dental providers

DOLORES COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
122	170	344
7%*	10%*	20%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

1 FQHC Provides Dental Services

174
more Medicaid enrollees with dental benefits will seek dental providers

DOUGLAS COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
5,157	7,461	15,146
2%*	3%*	5%*

* Percentage of County Population

Dental Care Supply

9 of 121
Private Practice Dentists Accept Medicaid

7.4%

1 FQHC Provides Dental Services

7,685
more Medicaid enrollees with dental benefits will seek dental providers

EAGLE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
2,413	2,851	6,322
5%*	6%*	12%*

* Percentage of County Population

Dental Care Supply

1 of 24
Private Practice Dentists Accept Medicaid

4.2%

0 FQHCs Provide Dental Services

3,471
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

EL PASO COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
41,902	60,172	101,432
7%*	10%*	17%*

* Percentage of County Population

Dental Care Supply

80 of 301
Private Practice Dentists Accept Medicaid

26.6%

4 FQHCs Provide Dental Services

41,260
more Medicaid enrollees with dental benefits will seek dental providers

ELBERT COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
648	975	2,287
3%*	5%*	9%*

* Percentage of County Population

Dental Care Supply

0 of 4
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

1,312
more Medicaid enrollees with dental benefits will seek dental providers

FREMONT COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
3,075	4,672	7,495
8%*	12%*	19%*

* Percentage of County Population

Dental Care Supply

6 of 16
Private Practice Dentists Accept Medicaid

37.5%

0 FQHCs Provide Dental Services

2,823
more Medicaid enrollees with dental benefits will seek dental providers

GARFIELD COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
4,444	5,647	10,401
8%*	11%*	18%*

* Percentage of County Population

Dental Care Supply

6 of 22
Private Practice Dentists Accept Medicaid

27.3%

1 FQHC Provides Dental Services

4,754
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

GILPIN COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
193	309	549
4%*	6%*	11%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

0 FQHCs Provide Dental Services

240
more Medicaid enrollees with dental benefits will seek dental providers

GRAND COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
481	676	1,613
4%*	5%*	12%*

* Percentage of County Population

Dental Care Supply

1 of 5
Private Practice Dentists Accept Medicaid

20.0%

0 FQHCs Provide Dental Services

937
more Medicaid enrollees with dental benefits will seek dental providers

GUNNISON COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
634	893	1,937
4%*	6%*	13%*

* Percentage of County Population

Dental Care Supply

1 of 6
Private Practice Dentists Accept Medicaid

16.7%

0 FQHCs Provide Dental Services

1,044
more Medicaid enrollees with dental benefits will seek dental providers

HINSDALE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
NA	NA	42
		6%*

* Percentage of County Population

Dental Care Supply

0 of 1
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

HUERFANO COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
627	972	1,637
13%*	21%*	34%*

* Percentage of County Population

Dental Care Supply

1 of 1
Private Practice Dentists Accept Medicaid

100%

0 FQHCs Provide Dental Services

665
more Medicaid enrollees with dental benefits will seek dental providers

JACKSON COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
72	72	226
6%*	6%*	20%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

0 FQHCs Provide Dental Services

154
more Medicaid enrollees with dental benefits will seek dental providers

JEFFERSON COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
23,011	33,122	64,220
5%*	7%*	14%*

* Percentage of County Population

Dental Care Supply

76 of 318
Private Practice Dentists Accept Medicaid

23.9%

2 FQHCs Provide Dental Services

31,098
more Medicaid enrollees with dental benefits will seek dental providers

KIOWA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
82	82	166
7%*	7%*	15%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

0 FQHCs Provide Dental Services

84
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage above state percentage

KIT CARSON COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
570	754	1,512
8%*	11%*	22%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

1 FQHC Provides Dental Services

758
more Medicaid enrollees with dental benefits will seek dental providers

LA PLATA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
2,556	3,754	7,373
5%*	8%*	14%*

* Percentage of County Population

Dental Care Supply

6 of 31
Private Practice Dentists Accept Medicaid

19.4%

0 FQHCs Provide Dental Services

3,619
more Medicaid enrollees with dental benefits will seek dental providers

LAKE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
639	823	1,612
9%*	12%*	22%*

* Percentage of County Population

Dental Care Supply

1 of 3
Private Practice Dentists Accept Medicaid

33.3%

0 FQHCs Provide Dental Services

789
more Medicaid enrollees with dental benefits will seek dental providers

LARIMER COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
15,137	22,249	42,430
6%*	8%*	15%*

* Percentage of County Population

Dental Care Supply

42 of 154
Private Practice Dentists Accept Medicaid

27.3%

3 FQHCs Provide Dental Services

20.181
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

LAS ANIMAS COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,287	1,902	3,292
10%*	15%*	25%*

* Percentage of County Population

Dental Care Supply

1 of 4
Private Practice Dentists Accept Medicaid

25.0%

0 FQHCs Provide Dental Services

1,390 more Medicaid enrollees with dental benefits will seek dental providers

LINCOLN COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
341	486	922
8%*	11%*	20%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

1 FQHC Provides Dental Services

436 more Medicaid enrollees with dental benefits will seek dental providers

LOGAN COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,323	1,926	3,576
7%*	10%*	19%*

* Percentage of County Population

Dental Care Supply

3 of 8
Private Practice Dentists Accept Medicaid

37.5%

1 FQHC Provides Dental Services

1,650 more Medicaid enrollees with dental benefits will seek dental providers

MESA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
11,111	16,069	26,410
9%*	13%*	21%*

* Percentage of County Population

Dental Care Supply

25 of 74
Private Practice Dentists Accept Medicaid

33.8%

2 FQHCs Provide Dental Services

10,341 more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage above state percentage

MINERAL COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
NA	NA	44
		8%*

* Percentage of County Population

Dental Care Supply

0 Private Practice Dentists

0 FQHCs Provide Dental Services

NR more Medicaid enrollees with dental benefits will seek dental providers

MOFFAT COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,061	1,517	2,763
9%*	13%*	24%*

* Percentage of County Population

Dental Care Supply

3 of 4 Private Practice Dentists Accept Medicaid

75.0%

0 FQHCs Provide Dental Services

1,246 more Medicaid enrollees with dental benefits will seek dental providers

MONTEZUMA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
2,360	3,400	5,772
11%*	16%*	26%*

* Percentage of County Population

Dental Care Supply

3 of 9 Private Practice Dentists Accept Medicaid

33.3%

0 FQHCs Provide Dental Services

2,372 more Medicaid enrollees with dental benefits will seek dental providers

MONTROSE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
3,735	5,242	9,030
11%*	16%*	26%*

* Percentage of County Population

Dental Care Supply

10 of 19 Private Practice Dentists Accept Medicaid

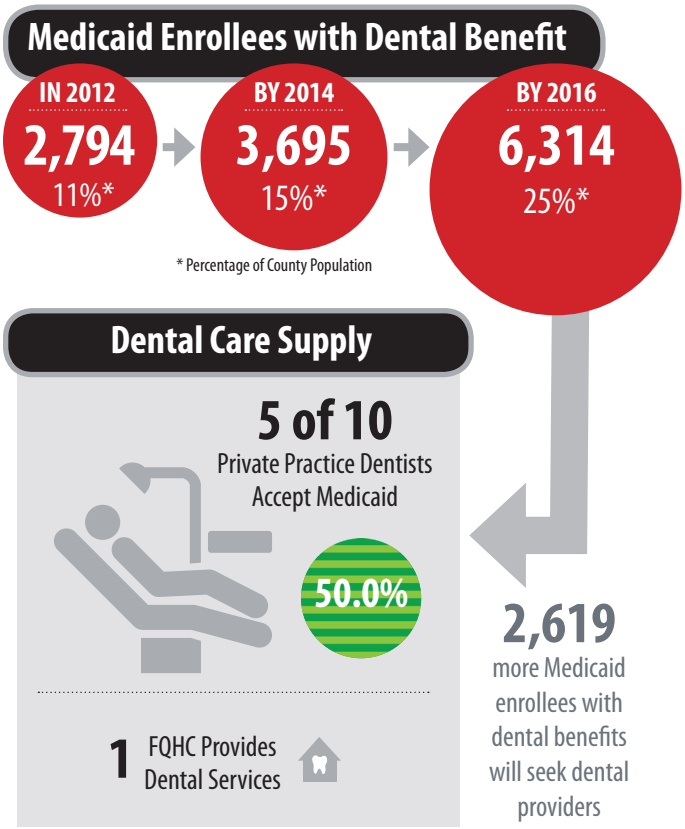
52.6%

1 FQHC Provides Dental Services

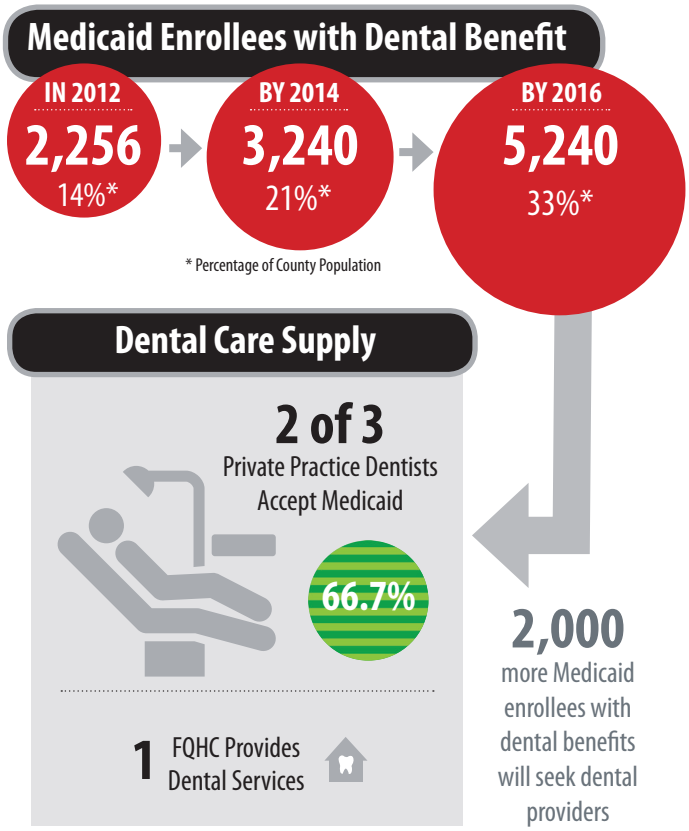
3,788 more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

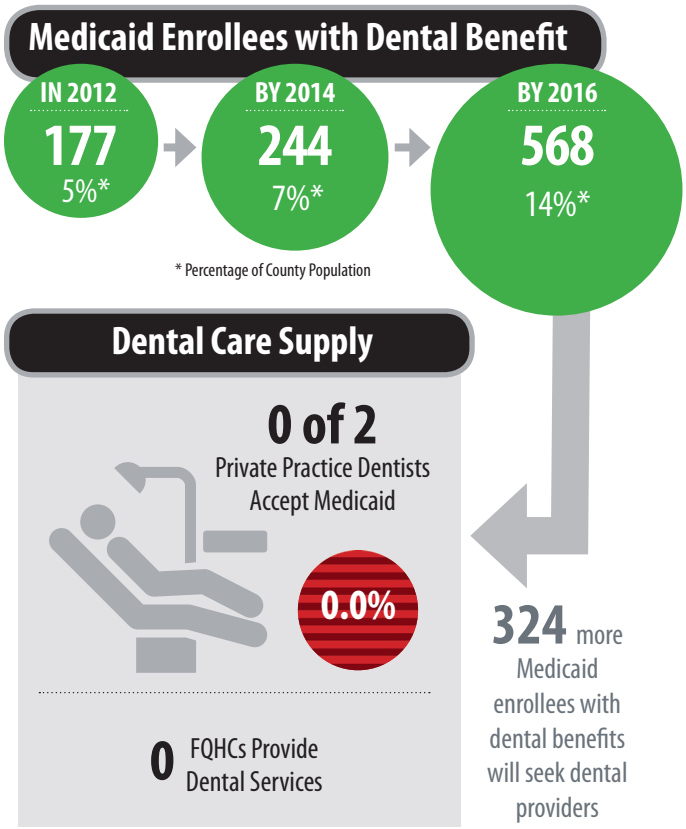
MORGAN COUNTY



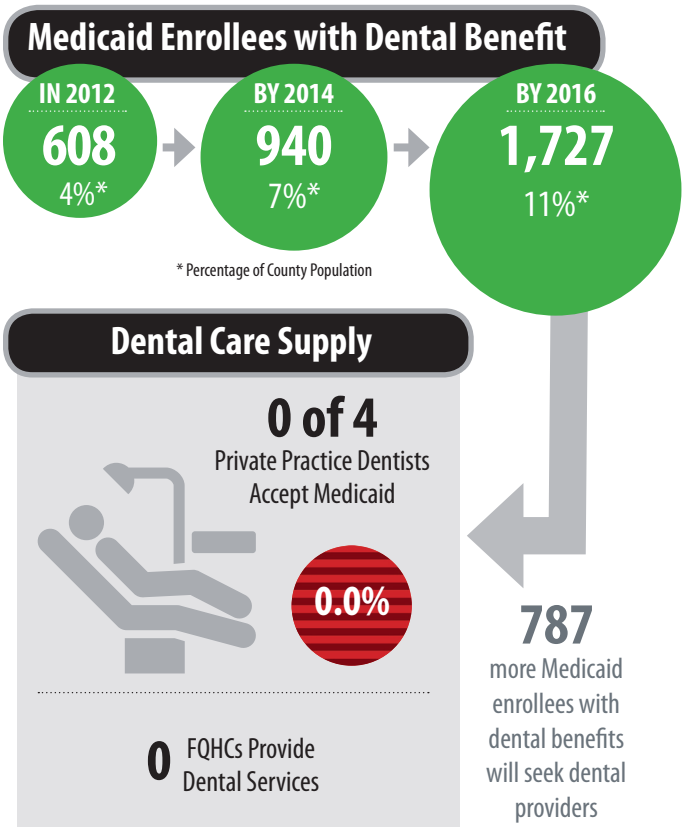
OTERO COUNTY



OURAY COUNTY



PARK COUNTY



= County percentage above state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage above state percentage

PHILLIPS COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
315	392	779
9%*	11%*	23%*

* Percentage of County Population

Dental Care Supply

0 of 1
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

387 more Medicaid enrollees with dental benefits will seek dental providers

PITKIN COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
197	240	1,153
1%*	2%*	7%*

* Percentage of County Population

Dental Care Supply

0 of 8
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

913 more Medicaid enrollees with dental benefits will seek dental providers

PROWERS COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,640	2,265	3,806
15%*	21%*	36%*

* Percentage of County Population

Dental Care Supply

2 of 4
Private Practice Dentists Accept Medicaid

50.0%

1 FQHC Provides Dental Services

1,541 more Medicaid enrollees with dental benefits will seek dental providers

PUEBLO COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
17,446	25,587	39,203
13%*	19%*	28%*

* Percentage of County Population

Dental Care Supply

60 of 63
Private Practice Dentists Accept Medicaid

95.2%

1 FQHC Provides Dental Services

13,616 more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

RIO BLANCO COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
407	588	1,109
7%*	10%*	19%*

* Percentage of County Population

Dental Care Supply

1 of 3
Private Practice Dentists Accept Medicaid

33.3%

0 FQHCs Provide Dental Services

521
more Medicaid enrollees with dental benefits will seek dental providers

RIO GRANDE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,400	2,088	3,422
14%*	20%*	33%*

* Percentage of County Population

Dental Care Supply

3 of 3
Private Practice Dentists Accept Medicaid

100%

1 FQHC Provides Dental Services

1,334
more Medicaid enrollees with dental benefits will seek dental providers

ROUTT COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
809	1,169	2,775
4%*	5%*	12%*

* Percentage of County Population

Dental Care Supply

4 of 16
Private Practice Dentists Accept Medicaid

25.0%

0 FQHCs Provide Dental Services

1,606
more Medicaid enrollees with dental benefits will seek dental providers

SAGUACHE COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
747	1,084	1,664
14%*	20%*	30%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

1 FQHC Provides Dental Services

580
more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

SAN JUAN COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
42	42	74
7%*	7%*	13%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

0 FQHCs Provide Dental Services

32 more Medicaid enrollees with dental benefits will seek dental providers

SAN MIGUEL COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
347	497	1,008
5%*	7%*	13%*

* Percentage of County Population

Dental Care Supply

0 of 2
Private Practice Dentists Accept Medicaid

0.0%

1 FQHC Provides Dental Services

511 more Medicaid enrollees with dental benefits will seek dental providers

SEDGWICK COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
186	244	462
10%*	13%*	25%*

* Percentage of County Population

Dental Care Supply

0 of 1
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

218 more Medicaid enrollees with dental benefits will seek dental providers

SUMMIT COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,130	1,377	3,232
4%*	5%*	12%*

* Percentage of County Population

Dental Care Supply

8 of 17
Private Practice Dentists Accept Medicaid

47.1%

5 FQHCs Provide Dental Services

1,855 more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage above state percentage

TELLER COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
1,126	1,720	2,919
6%*	9%*	14%*

* Percentage of County Population

Dental Care Supply

0 of 4
Private Practice Dentists Accept Medicaid

0.0%

1 FQHC Provides Dental Services

1,199 more Medicaid enrollees with dental benefits will seek dental providers

WASHINGTON COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
265	364	764
7%*	10%*	22%*

* Percentage of County Population

Dental Care Supply

0
Private Practice Dentists

0 FQHCs Provide Dental Services

400 more Medicaid enrollees with dental benefits will seek dental providers

WELD COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
21,717	29,399	47,642
9%*	12%*	18%*

* Percentage of County Population

Dental Care Supply

21 of 70
Private Practice Dentists Accept Medicaid

30.0%

5 FQHCs Provide Dental Services

18,243 more Medicaid enrollees with dental benefits will seek dental providers

YUMA COUNTY

Medicaid Enrollees with Dental Benefit

IN 2012	BY 2014	BY 2016
825	1,080	1,998
10%*	13%*	23%*

* Percentage of County Population

Dental Care Supply

0 of 3
Private Practice Dentists Accept Medicaid

0.0%

0 FQHCs Provide Dental Services

918 more Medicaid enrollees with dental benefits will seek dental providers

= County percentage above state percentage
= County percentage below state percentage
= County percentage around state percentage
= County percentage around state percentage
= County percentage below state percentage
= County percentage above state percentage

Methodology

Private Practice Dentists

The number of private practice dentists in each county is from the Peregrine MedicalQuest database. A dentist was counted as practicing in a county if he or she reported working at least one day per week or four days per month. If a dentist reported working more than four days per month in more than one county, he or she was counted once in each county.

CHI removed the dentists who work at FQHCs from this count in order to compare Medicaid caseload data with private practice dentists accepting Medicaid.

CHI focused its analysis on dentists who are licensed to provide a full spectrum of the services that will be covered by Medicaid.

Private Practice Dentists Accepting Medicaid

The Colorado Department of Health Care Policy and Financing's (HCPF) quarterly dental benefits management report is the source for the numbers of private practice dentists who accept Medicaid. HCPF data include any dentist who provided services to Medicaid enrollees in fiscal year 2011-12. The estimate is based on the current Medicaid dental benefit, which is primarily limited to ages 0-20.

Federally Qualified Health Centers (FQHCs)

CHI limited its analysis of safety net clinic dental services to FQHCs. These centers are required by federal regulations to provide dental services directly or by referral. They primarily serve Medicaid enrollees. FQHC data are from the Colorado Community Health Network and show the number and county location of clinics that provided dental services directly as of July 2013. Mobile clinics and services provided by referral were not included in the analysis.

Many organizations that are not affiliated with FQHCs are considered part of the safety net, including community safety net clinics, rural health clinics and school-based health centers. There is less data on the extent that dental services are offered in these clinics.

Medicaid Enrollment and Expansion

CHI's analysis takes into account three groups of Medicaid enrollees to reflect the staged growth in dental benefits in 2014 and 2016. CHI's estimates do not include seniors over the age of 65, who will be eligible for the dental benefit if enrolled in Medicaid. Enrollment numbers are from HCPF unless otherwise noted.

- 2012 Medicaid enrollees include children up to 19 years. Medicaid enrollees who are 19 or 20 are not included.
- 2014 Medicaid enrollees include all current enrollees up to age 65 in 2012.
- Medicaid enrollment estimates for 2016 include the 2014 Medicaid enrollee counts and the number expected to gain coverage by January 2016 due to Colorado's decision to expand Medicaid to 138 percent FPL. Estimates are based on CHI's estimates of Medicaid enrollment by 2016 and were rounded up to whole numbers.

Colorado Health Institute is a trusted source of independent and objective health information, data and analysis for the state's health care leaders. Colorado Health Institute is funded by the Caring for Colorado Foundation, Rose Community Foundation, The Colorado Trust and The Colorado Health Foundation.

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