

I-Smile™@School

The 2018-2019 Update on the Iowa Department of Public Health's School-Based Sealant Program

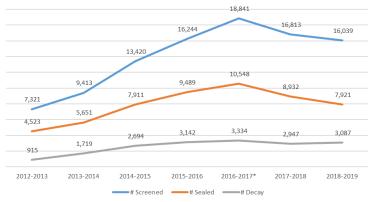
I-Smile™ @ School services are provided through 20 contractors - public and private non-profit organizations that manage lowa's Title V Maternal and Child Health program. Dental hygienists provide dental screenings, risk assessments, sealant and fluoride varnish applications, classroom and individual oral health education, as well as care coordination to encourage regular dental visits and also to help kids identified with decay to get restorative treatment when needed. These hygienists and other staff build and grow relationships with community stakeholders to ensure high-risk school-aged children have access to low-cost and beneficial oral health prevention services. I-Smile™ @ School is supported by funding from the Centers for Disease Control and Prevention (CDC), Delta Dental of Iowa Foundation (DDIAF), Health Resources and Services Administration (Title V grant), and Medicaid reimbursement.

IDPH has overseen school-based sealant programs since 1995 and significant expansion occurred in 2013 (Table 1), due to a cooperative agreement with the Centers for Disease Control and Prevention (CDC) and partnership with the Delta Dental of lowa Foundation (DDIAF). In the 2018-2019 school year, more than twice as many students received dental screenings than in 2013, and the number of

students receiving dental sealants was 75% greater in the 2018-2019 school year then in 2013.

Although the total number of students served has risen since 2013, a decline in participation has been trending since 2016-2017. Fewer students participating may be the result of some of the following issues: 1) schools are transitioning to electronic registration processes, which do not include consents for non-school sponsored activities; and 2) hiring, securing and retaining workforce is challenging in public health. To increase participation, IDPH has developed electronic consent options and shares best-practice program models with contractors.

Figure 1: Children Receiving I-Smile™@ School Services



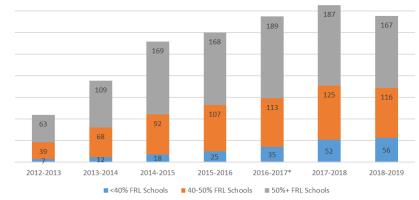
^{*}Some data may be replicated as a result of a transition to the TAVConnect data system on 4/1/2017.

The number of schools with 40% or greater Free and Reduced (FRL) participation rates that are served by I-Smile™ @ School has increased greatly (Table 2), from 102 schools in the 2012-2013 school year to 283 schools in the 2018-2019 school year. The number of schools with a FRL rate below 40% also increased from seven to 56, due in part to local awareness of other dental health care barriers within communities.

A major barrier in lowa is access to dentists that accept patients enrolled in lowa Medicaid and Hawki insurances. Focusing on schools with higher FRL rates ensures that preventive dental services are provided for children who may otherwise not receive them. Each year, at least 50% of I-Smile™ @ School participants are Medicaid-enrolled children (Table 3). An increasingly larger proportion of privately insured children are also participating each year, which may indicate difficulty for families to access care using the current dental delivery system.

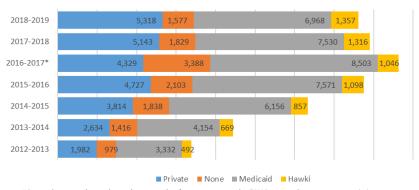
Program impact can be seen by looking at caries (cavities) aversion calculations (Table 4). Since the start of the 2012-2013 school year, I-Smile™ @ School has averted more than 17,400 cavities. In addition, it is estimated that 1.6 million dollars would have been spent by insurers and families on restorative treatment, had children not received dental sealants (when considering the smallest cavity and least costly type of restoration at current procedure reimbursement rates).

Figure 2: Schools Served



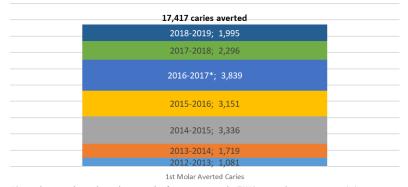
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Figure 3: Payment Source of Children Served



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Figure 4: Averted 1st Molar Caries



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lowa's school-based dental sealant programs have prevented tooth decay and improved access to care and the overall oral health of students for more than 20 years. Alternative preventive and educational oral health services, especially in school settings, will be increasingly important to ensure all children have access to oral health care as the landscape of our state changes due to the COVID-19 pandemic. The IDPH I-Smile™ @ School program's commitment to increase oral health access for some of our most vulnerable lowans remains strong.

