

The Pregnancy Risk Assessment Monitoring System (PRAMS) is a survey of women who recently gave birth that asks about their experiences and behaviors before, during and shortly after their pregnancy. Vermont has participated in PRAMS since 2001. This report presents information on oral health among Vermonters who gave birth between 2012 and 2014.



Dental Visits

Women who were privately insured for their prenatal care were more likely to have a dental visit (a teeth cleaning or seeing a dentist about an oral health problem) during pregnancy than women who were enrolled with Medicaid.

For 2014 births, 76.6% of women who reported having private insurance that included dental coverage had a dental visit, compared to 50.3% of Medicaid enrollees.

Among Vermont women who gave birth in the years 2012 through 2014, there was no significant change in the rate of dental visits by year.

*Private insurance that provided dental coverage. Approximately 19% of privately insured women reported having no dental insurance.

Other Factors Associated with Dental Visits

Women who gave birth were significantly more likely to have had a dental visit during pregnancy if they:

- Were older
- Had attended college
- Had a higher household income
- Did not smoke during pregnancy

These differences were significant in each year from 2012 through 2014 (rates for mothers of 2014 births are shown on the graph).



Had a Dental Visit During Pregnancy

108 Cherry Street • PO Box 70 • Burlington, VT 05402 • HealthVermont.gov



Dental Care and Awareness of Oral Health

Among Vermonters who gave birth in 2014:

- 93.4% knew it was important to care for their teeth and gums during pregnancy.
- 77.3% reported having insurance to cover dental care during pregnancy^{*}.
- 59.3% had their teeth cleaned by a dentist or dental hygienist.
- 58.7% talked with a dental or other healthcare worker about how to care for their teeth and gums.
- 21.4% reported that they needed to see a dentist for a problem[†].
 - 69.6% of those who reported needing to see a dentist for a problem visited a dental or dental clinic.



Out of all Vermonters who gave birth in the years 2012 to 2014, 7.0% reported that they needed to see a dentist for a problem during pregnancy but did not go to the dentist⁺ for any reason (either for a problem or for a teeth cleaning). These Vermonters were significantly more likely to have been:

- On Medicaid rather than on private insurance
- Living in households below the federal poverty level
- Without any college education
- Cigarette smokers versus nonsmokers
- Under 25 years of age

These differences were significant within each birth year.





^{*} Many insurance enrollees are unaware of the dental coverage available to them during pregnancy

[†] Items on needing a dental visit for a problem should be interpreted with caution, as some respondents who reported going to a dentist about a problem did not report needing to see a dentist about a problem. Three respondents who said they did not go to the dentist about an existing problem did report getting a cleaning, and are excluded from the analysis of those who had a problem and did not see a dentist.



Barriers to Dental Visits

Among Vermonters who gave birth in 2014:

- 26.3% reported they could not afford to go to the dentist or dental clinic.
- 22.1% of those on Medicaid could not find a dentist or dental clinic that would take Medicaid patients.
- 11.7% did not think it was safe to go to the dentist during pregnancy.
- 6.9% could not find a dentist or dental clinic that would take pregnant patients.



Dental Coverage and Affordability as Barriers

Effective October 2012, the annual benefits cap for pregnant women enrolled in the Dr. Dynasaur/Medicaid program was removed. As a result, Medicaid fully covered the dental costs (without requiring copayment) of pregnant women through 60 days postpartum.

Among Medicaid-insured Vermonters, 29.1% of those who gave birth in 2012 could not find a dentist or dental clinic that would take Medicaid patients during pregnancy compared to 22.9% who gave birth in 2013 and 22.1% who gave birth in 2014. However, these differences were not statistically significant.

Among Medicaid-insured Vermonters, 37.8% of those who gave birth in 2012 reported that they could not afford to go to the dentist or dental clinic during pregnancy compared to 23.3% who gave birth in 2013 and 22.7% who gave birth in 2014. The percentages in 2013 and 2014 were significantly lower than 2012 (both p < .03).

Among exclusively (i.e., without any additional Medicaid coverage) privately insured Vermonters, 24.9% of those who gave birth in 2012 reported that they could not afford to go to the dentist or dental clinic during pregnancy compared to 24.0% who gave birth in 2013 and 22.8% who gave birth in 2014. There was no significant difference between years.



Affordability as Reported Barrier to Dental Care



The following questions were used for this data brief:

This question is about the care of your teeth <u>during</u> your most recent pregnancy. For each item, check NO if it is not true or does not apply to you or YES if it is true.

- I knew it was important to care for my teeth and gums during pregnancy
- A dental or other health care worker talked with me about how to care for my teeth and gums
- I had my teeth cleaned by a dentist or dental hygienist
- I had insurance to cover dental care during my pregnancy
- I needed to see a dentist for a problem
- I went to a dentist or dental clinic about a problem

Did any of the following things make it hard for you to go to a dentist or dental clinic about the problem you had during *your most recent* pregnancy? For each item, check NO if it was not something that made it hard for you to go to a dentist during pregnancy or YES if it was.

- I could not find a dentist or dental clinic that would take pregnant patients
- I could not find a dentist or dental clinic that would take Medicaid patients
- I did not think it was safe to go to the dentist during pregnancy
- I could not afford to go to the dentist or dental clinic

Report completed by statistics intern Andrew Sparks and Vermont PRAMS. Questions or comments about this report, or requests for further data, may be sent to John Davy at <u>john.davy@vermont.gov</u> or (802) 863-7661. More information about Vermont PRAMS can also be found at <u>http://www.healthvermont.gov/PRAMS</u>.