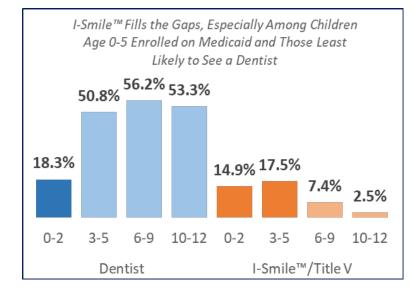
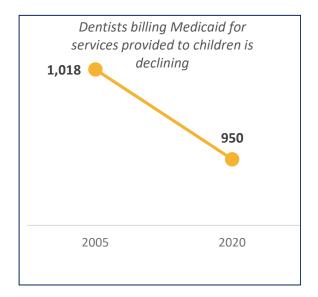
## **2020 UPDATE ON CHILDREN'S ORAL HEALTH IN IOWA**



The I-Smile<sup>™</sup> dental home initiative connects lowa children and families with dental, medical, and community resources to ensure a lifetime of health and wellness. Good oral health allows children the ability to eat well, grow and thrive, concentrate on learning, feel positive about their appearance, and improve social interactions, thus contributing to overall well-being and reducing future dental and medical costs.





## I-SMILE<sup>®</sup> DEVELOPS CRITICAL PARTNERSHIPS

**WIC:** A family receiving services through a local WIC program was having difficulty getting children enrolled on Medicaid. The I-Smile<sup>™</sup> Coordinator completed presumptive eligibility to enroll the children and also found the family medical and dental providers for their health care.

**Physicians:** A pediatrician found several areas of decay during a well-child visit and referred the two-year-old to the I-Smile<sup>™</sup> Coordinator to arrange dental care. She was able to get the child a dental appointment the same day; the child had complained of an earache, but the pain was related to the decayed teeth that the dentist extracted.

**Teachers:** An I-Smile<sup>™</sup> Coordinator provided education for elementary students and was approached by one of the teachers. A child in her class had written an essay about wanting a fractured front tooth fixed. The student had stopped smiling and making videos that she had done in the past because of the appearance of her front teeth. The coordinator was able to help the student receive the treatment needed and has been told by the child's grandmother that her granddaughter is smiling once again.

## **CHILDREN'S ORAL** HEALTH IN IOWA



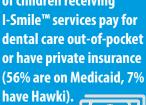
children served by I-Smile<sup>™</sup> received care coordination for dental care in SFY20; more than 7,300 received specific personalized help for their needs.



of children receiving a dental screening from I-Smile<sup>™</sup> staff have active decay.



of children receiving





SFY20 Medicaid paid claims and I-Smile<sup>™</sup> program data



I-Smile<sup>™</sup> began in 2006. In partnership with the Iowa Department of Human Services, the lowa Department of Public Health (IDPH) administers I-Smile<sup>™</sup> through contracts with regional public and private non-profit organizations. These contractors implement I-Smile<sup>™</sup> statewide in all 99 counties. Each of the contractors employ a dental hygienist, who serves as the local I-Smile<sup>™</sup> Coordinator.

The 23 I-Smile<sup>™</sup> Coordinators focus on preventing dental disease, identifying ways to help families address challenges so that all underserved children may receive care from dentists, and promoting the importance of oral health within their communities through:

- Developing relationships with dental offices to increase availability of appointments for children:
- Assisting families with scheduling dental appointments and linking to needed community resources;
- Building partnerships with businesses, organizations, and schools to increase oral • health awareness:
- Participating in community events and meetings, incorporating oral health within health and social initiatives:
- Addressing oral health issues of county residents through partnership with local boards of health;
- Training medical office staff to provide oral screenings and fluoride applications for children at well-child visits:
- Educating parents, children, and the public about oral health and preventing cavities; and
- Assuring that children have access to preventive care such as oral screenings and fluoride applications.

CAREER I WAS INVOLVED IN MULTIPLE COMMUNITY ENDEAVORS TO PRO ent for people who had limited access to COORDINATORS HAVE REEN & WONDEREUL CONTACT AND LIAISON TO OUR MOST NEEDY POPULATION... WITHOUT THIS CONNECTI OSSIBLE TO REACH THE PEOPLE WHO NEED THE CARE THE MOST."

- Retired Dentist in Eastern Iowa

lowa's I-Smile<sup>™</sup> system continues to demonstrate its value, yet limited access to dental care and oral health disparities are growing for some lowa families. In the past year, the COVID pandemic resulted in fewer opportunities for the I-Smile<sup>™</sup> program to provide gap-filling preventive dental care, such as fluoride applications and screenings, for atrisk children. In addition, 180 fewer dentists provided a service for a child on Medicaid than in 2019, illustrating the pronounced struggle I-Smile<sup>™</sup> Coordinators and their local teams currently experience trying to help families find a dental home.

To address the growing crisis in Iowa, program enhancements and/or new policies are needed that will encourage provider participation, allow full use of available workforce, consider new workforce models, and adopt measures that address social determinants of health and the life course of lowans.

lowa Department of Public Health - Bureau of Oral and Health Delivery System ismile.idph.iowa.gov





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