Chartbook: The Oral Health of Los Angeles County's Residents

LA County Department of Public Health
Oral Health Program
July 2022

Funded by the Office of Oral Health,
California Department of Public Health,
Contract #17-10698

Introduction

- This chartbook, which accompanies the Los Angeles County Burden of Oral Disease report, highlights current data on topics associated with the oral health of LA County's residents including, but not limited to
  - Tooth decay in children and tooth loss in adults
  - Oral and pharyngeal (throat) cancer
  - Use of the dental care delivery system
  - Access to preventive services
  - Dental workforce
- Each topic area includes graphs with current data and, when available, data on disparities and trends
- The chartbook is updated as new data becomes available

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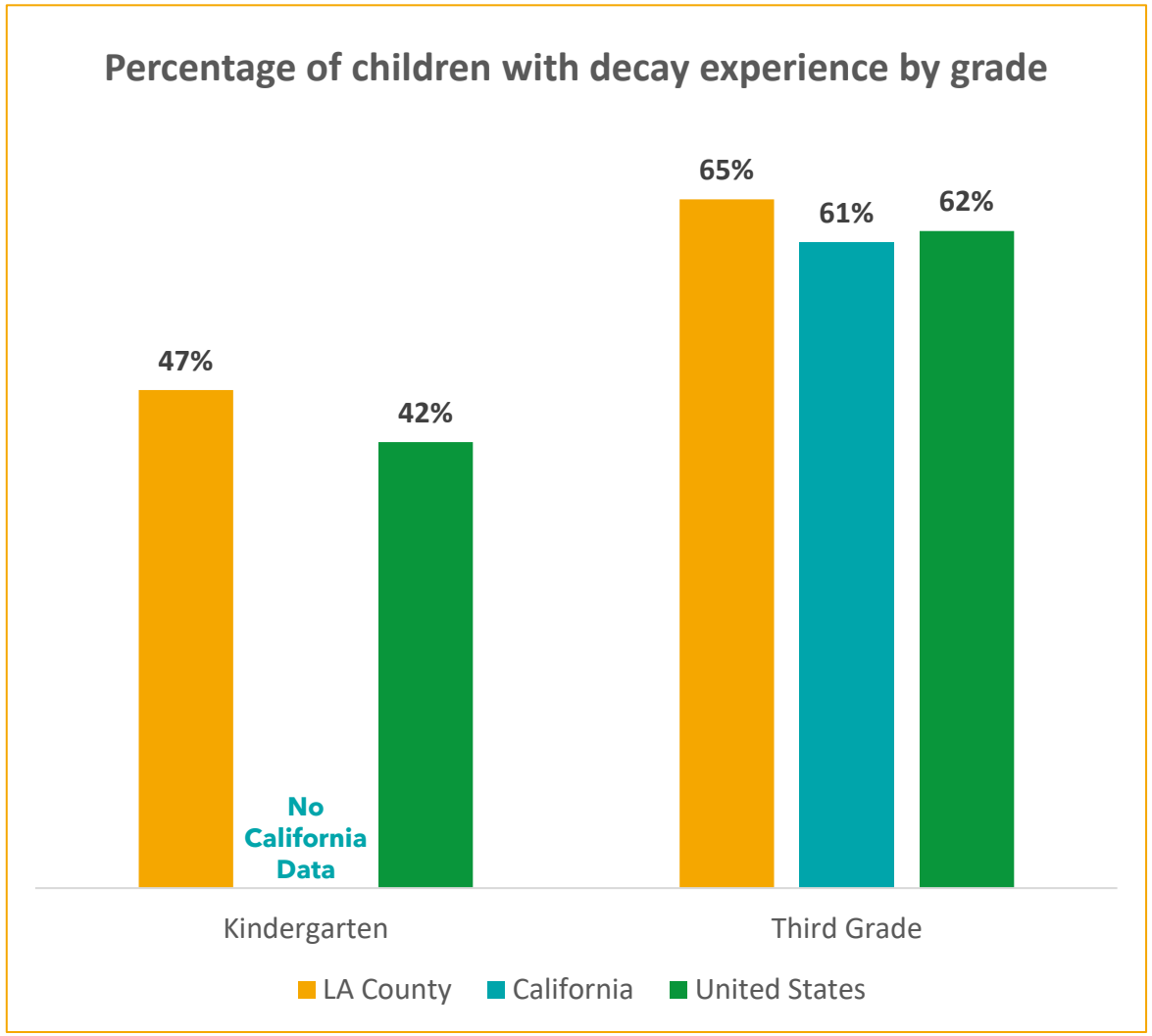
ORAL HEALTH OF LA COUNTY'S CHILDREN
DATA-AT-A-GLANCE

Grade/Indicator	LA County 2005	LA County 2020	California 2018-2019	United States 2011-2014	United States 2011-2016
Kindergarten					
Tooth decay experience	56%	47%	NA	42%	42%
Untreated decay	25%	19%	NA	22%	15%
Third grade					
Decay experience	74%	65%	61%	62%	60%
Untreated decay	27%	21%	22%	22%	20%
Dental sealants	21%	31%	37%	42%	42%
Kindergarten & third combined					
Decay experience	66%	55%	NA	NA	NA
Untreated decay	26%	20%	NA	NA	NA

Tooth Decay Experience - Overall Prevalence

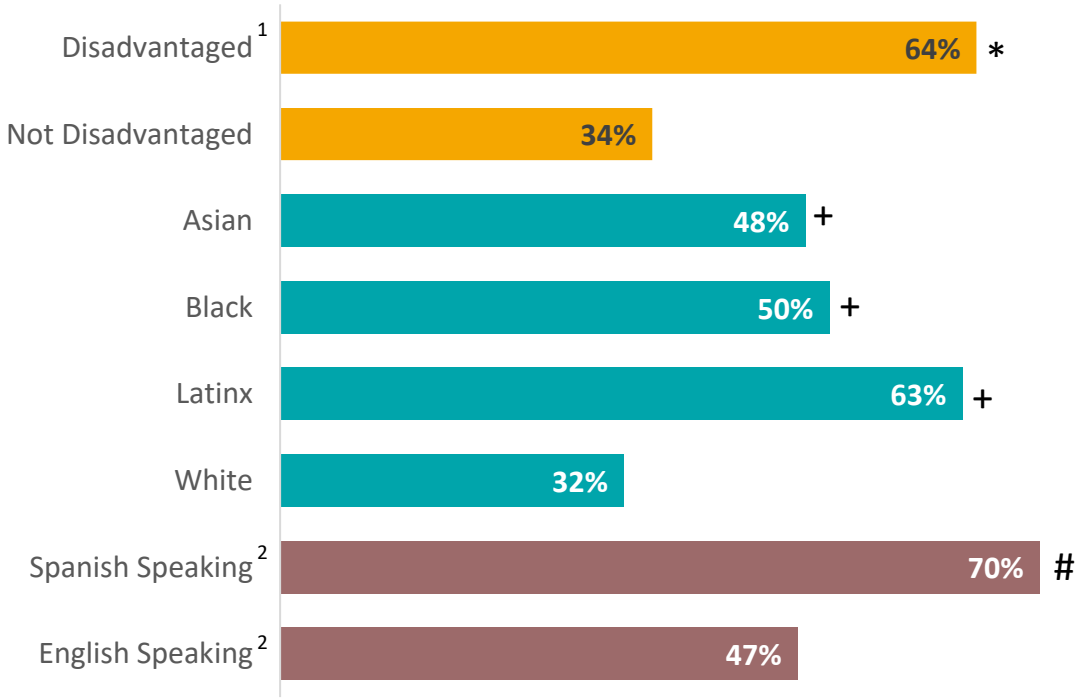


- Kindergarten
  - Compared to the U.S. average, children in LA County have a higher prevalence of decay experience
  - California data for kindergarten is not available
- Third grade
  - Compared to California and the U.S. average, children in LA County have a higher prevalence of decay experience

- Decay experience means that a child has had tooth decay at some point during his or her lifetime. Decay experience can include evidence of past treatment (e.g., fillings, crowns, or teeth that have been extracted because of decay) or evidence of untreated decay at the present time (e.g., untreated cavities).
- Data Sources: Los Angeles County Smile Survey 2020, California Smile Survey 2018-2019, National Health and Nutrition Examination Survey 2011-2016 (Secondary analyses, 5-year-old children (kindergarten) and children with second grade as the highest grade completed (third grade).

Tooth Decay Experience – LA County Disparities

Percentage of kindergarten and third grade children with decay experience by income, race/ethnicity, and parent's primary language



*Significantly higher prevalence than not disadvantaged
+Significantly higher prevalence than white children
#Significantly higher prevalence than children from English speaking households

Lower income children are significantly more likely to have tooth decay compared to their higher income peers

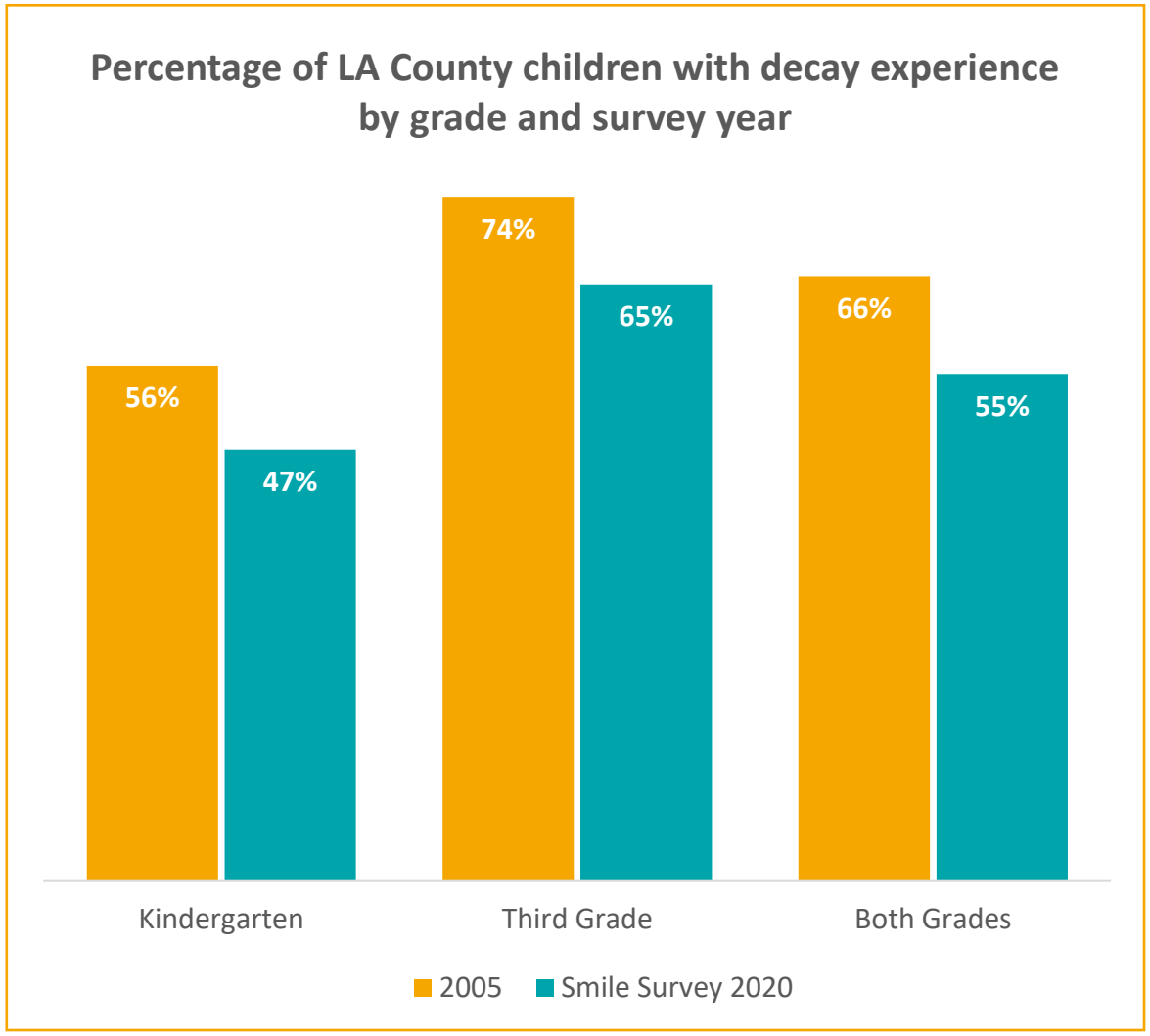
Children from racial/ethnic minority groups are significantly more likely to have tooth decay compared to White children

Children from households where Spanish is the primary language are significantly more likely to have tooth decay compared to children from English speaking households

[1] Children identified by the California Department of Education (CDE) as being a migrant, a foster child, or homeless at any time during the academic year; being eligible for the National School Lunch Program at any time during the academic year; or having parents who did not receive a high school diploma.
[2] Parents primary language, also known as "native language" obtained by the CDE using the Home Language Survey.

- Decay experience means that a child has had tooth decay at some point during his or her lifetime. Decay experience can include evidence of past treatment (e.g., fillings, crowns, or teeth that have been extracted because of decay) or evidence of untreated decay at the present time (e.g., untreated cavities).
- Data Source: Los Angeles County Smile Survey 2020

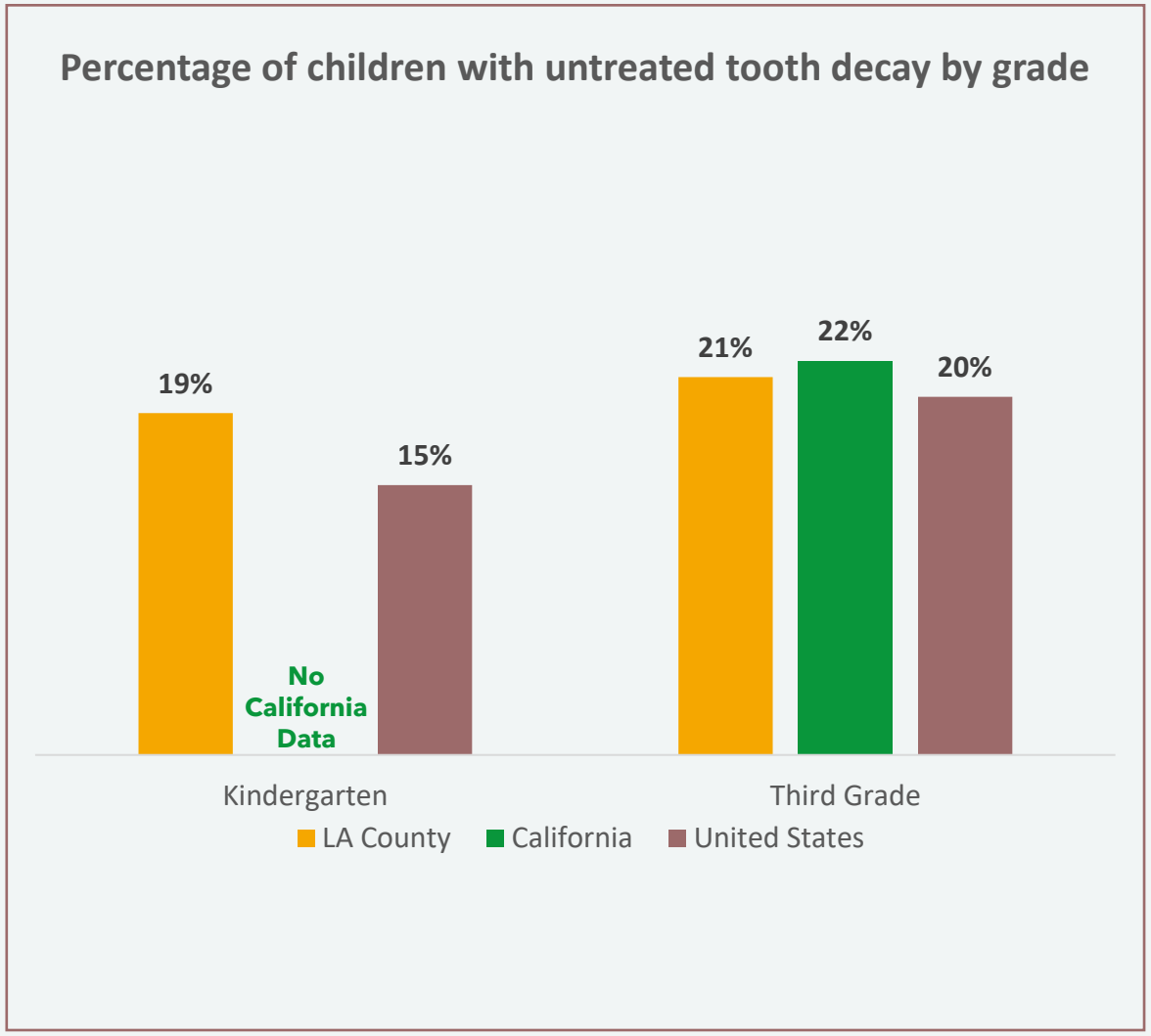
Tooth Decay Experience – LA County Trends



- Since 2005, there has been a significant reduction in the percentage of children with tooth decay experience

- Decay experience means that a child has had tooth decay at some point during his or her lifetime. Decay experience can include evidence of past treatment (e.g., fillings, crowns, or teeth that have been extracted because of decay) or evidence of untreated decay at the present time (e.g., untreated cavities).
- Data Source: California Smile Survey 2005 (secondary analysis of data from LA County schools), Los Angeles County Smile Survey 2020

Untreated Tooth Decay - Overall Prevalence

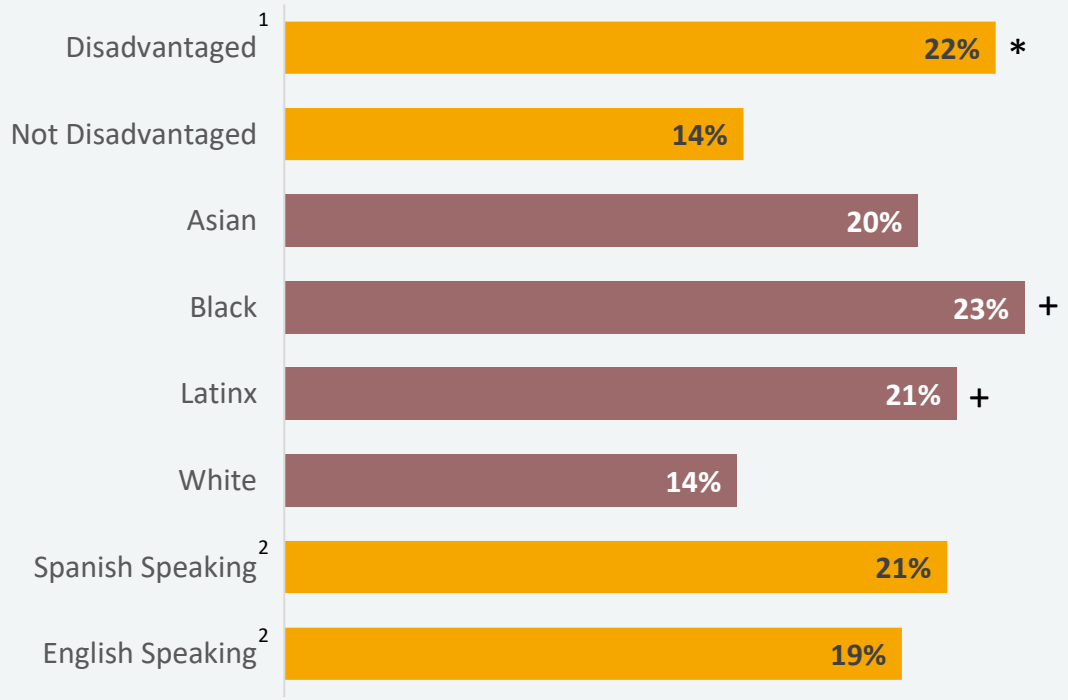


- Kindergarten
  - Compared to the U.S. average, children in LA County have a higher prevalence of untreated decay
  - California data for kindergarten is not available
- Third grade
  - Compared to California and the U.S. average, children in LA County have a similar prevalence of untreated decay

- Untreated tooth decay means that a child has evidence of tooth decay (e.g., one or more cavities) that has not received treatment
- Data Sources: Los Angeles County Smile Survey 2020, California Smile Survey 2018-2019, National Health and Nutrition Examination Survey 2011-2016 (Secondary analyses, 5-year-old children (kindergarten) and children with second grade as the highest grade completed (third grade).

Untreated Tooth Decay – LA County Disparities

Percentage of LA County kindergarten and third grade children with untreated decay by income, race/ethnicity, and parent's primary language



*Significantly higher prevalence than not disadvantaged
+Significantly higher prevalence than white children

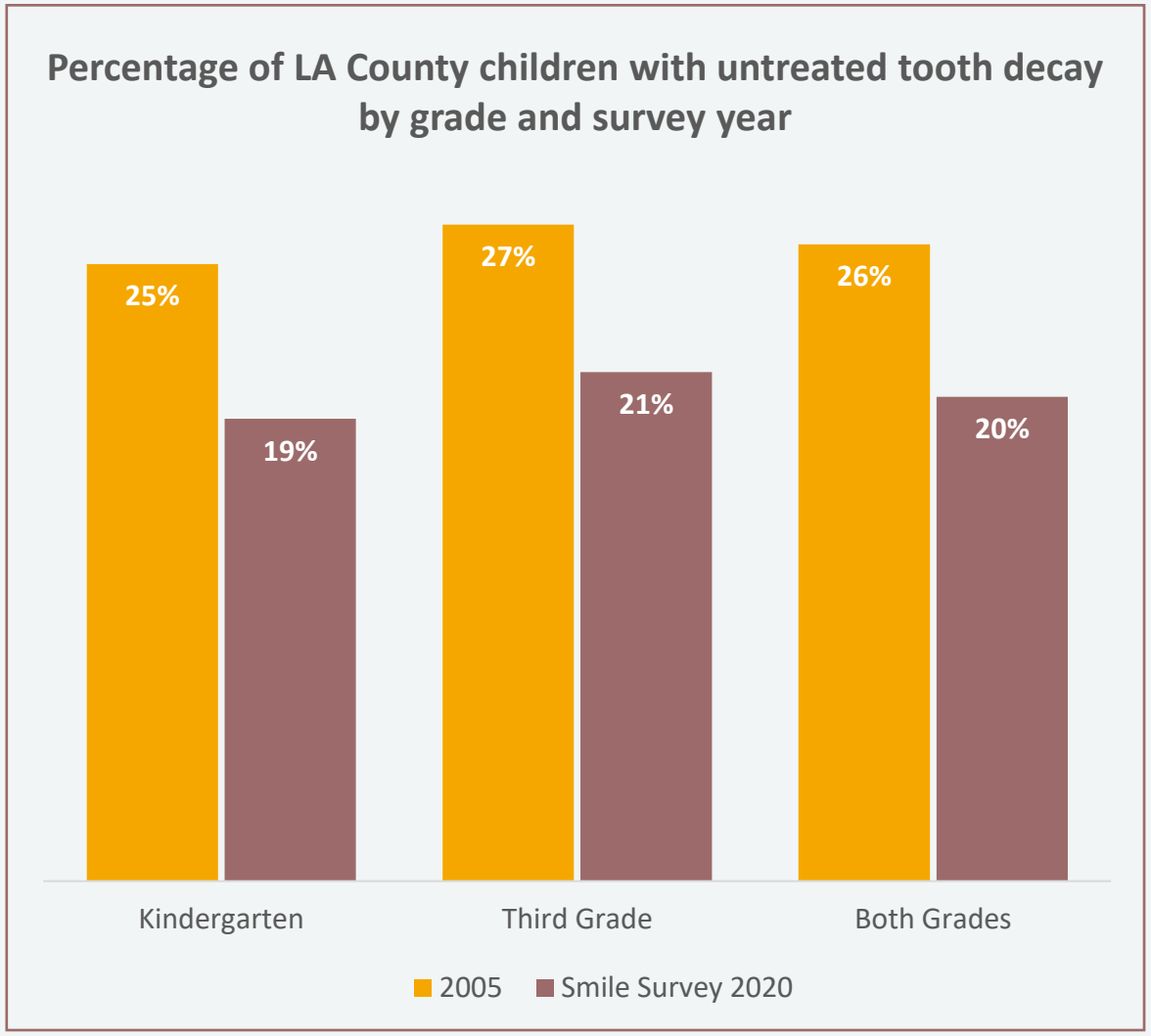
Lower income children are significantly more likely to have untreated tooth decay compared to their higher income peers

Compared to White children, Black/African American and Latinx children are significantly more likely to have untreated tooth decay

[1] Children identified by the California Department of Education (CDE) as being a migrant, a foster child, or homeless at any time during the academic year; being eligible for the National School Lunch Program at any time during the academic year; or having parents who did not receive a high school diploma.
[2] Parents primary language, also known as "native language" obtained by the CDE using the Home Language Survey.

- Untreated tooth decay means that a child has evidence of tooth decay (e.g., one or more cavities) that has not received treatment
- Data Source: Los Angeles County Smile Survey 2020

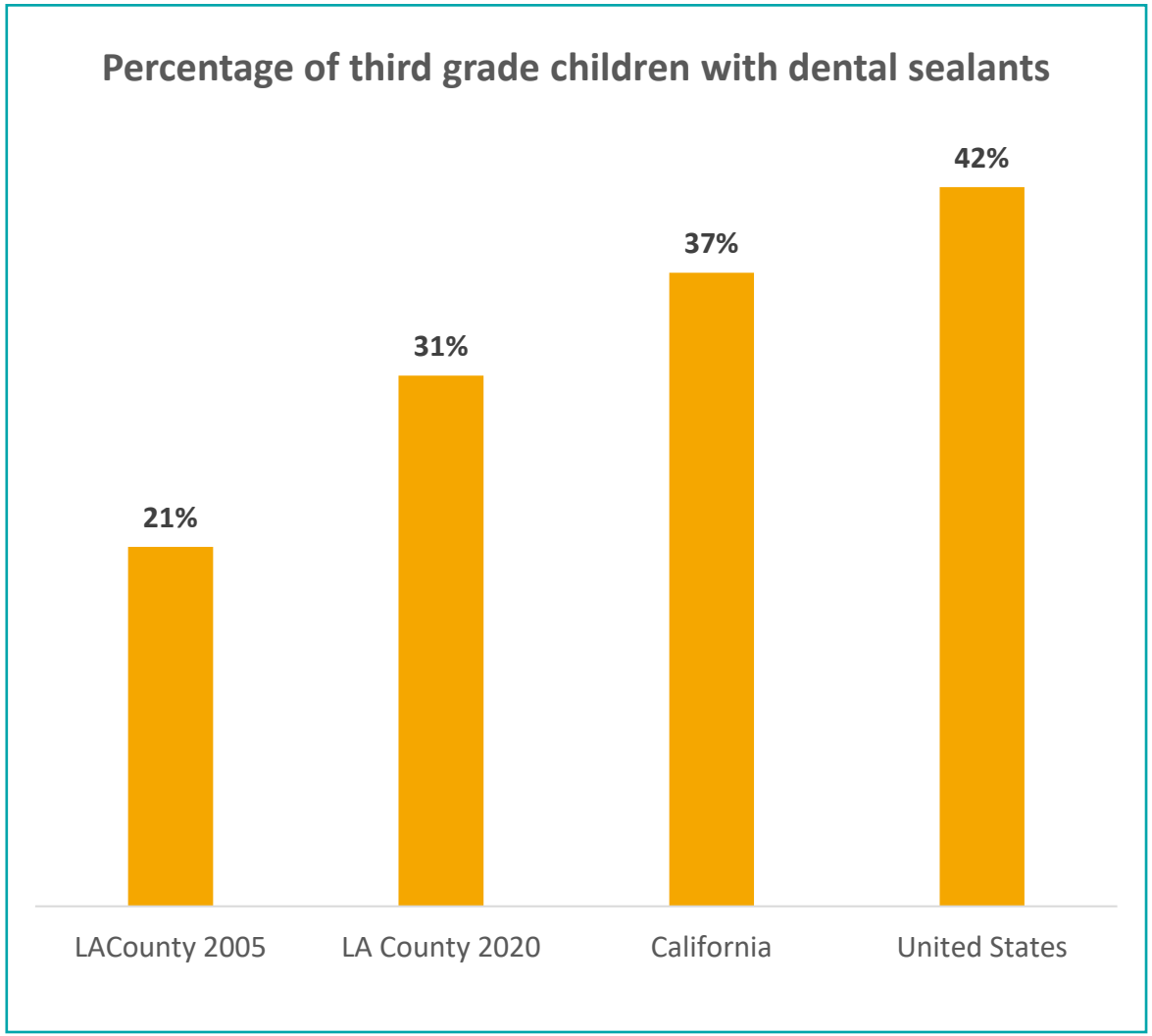
Untreated Tooth Decay – LA County Trends



- Since 2005, there has been a significant reduction in the percentage of children with untreated tooth decay

- Untreated tooth decay means that a child has evidence of tooth decay (e.g., one or more cavities) that has not received treatment
- Data Source: California Smile Survey 2005 (secondary analysis of data from LA County schools), Los Angeles County Smile Survey 2020

Dental Sealants – Prevalence, Disparities & Trends



- Although the percentage of 3rd grade children in LA County with sealants increased from 2005 to 2020, the prevalence falls below the state and national averages
- Sealant disparities have been addressed - the percentage of children in LA County with sealants does not vary by income, race/ethnicity, or parent's primary language

- Dental sealants are plastic-like coatings applied to the chewing surfaces of teeth with pits and fissures (grooves). The applied sealant bonds to tooth structure and fills the grooves of teeth to form a protective barrier to decay.
- Data Sources: California Smile Survey 2005 (secondary analysis of data from LA County schools), Los Angeles County Smile Survey 2020, California Smile Survey 2018-2019, National Health and Nutrition Examination Survey 2011-2016 (Secondary analyses, children with second grade as the highest grade completed).

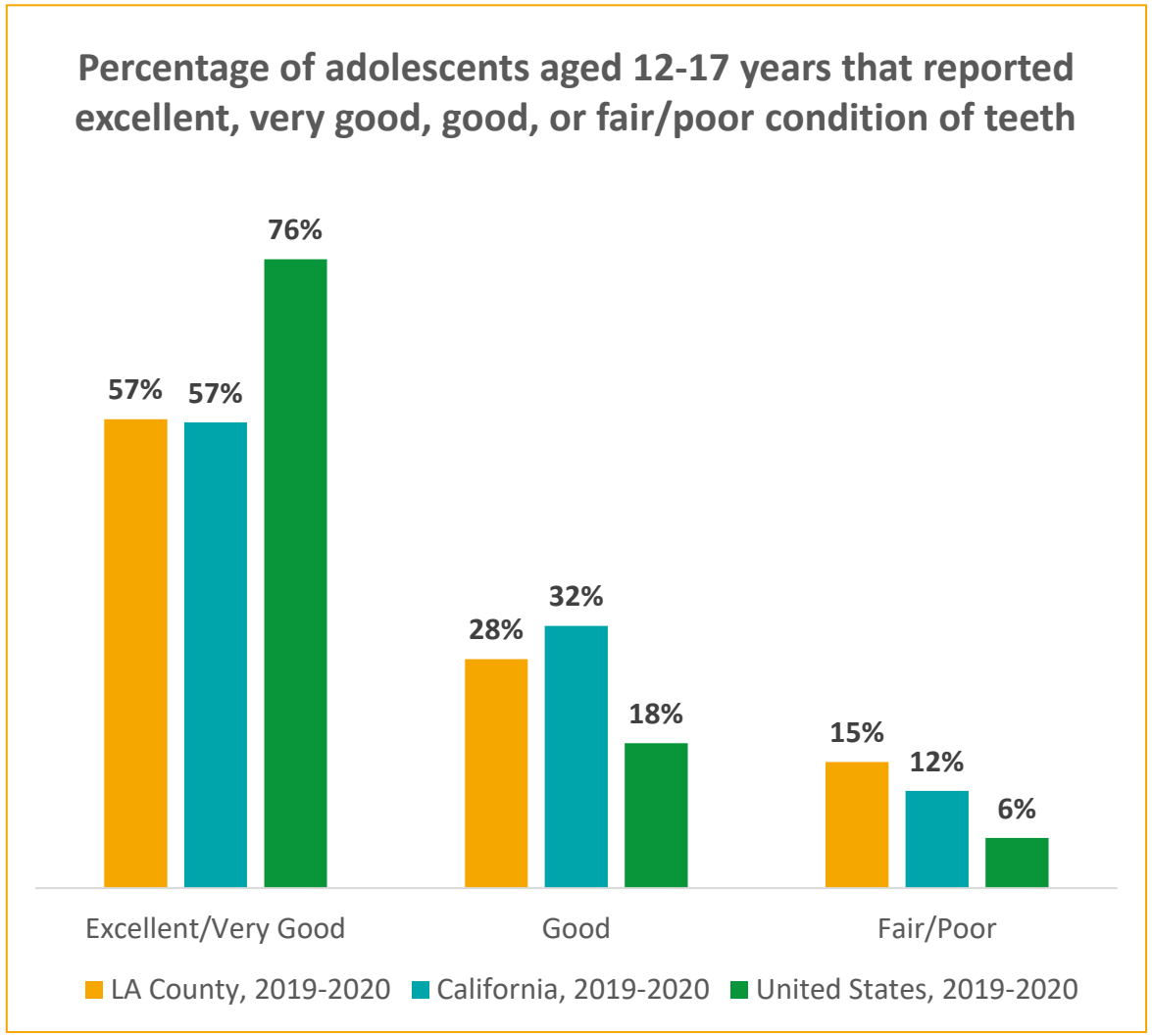
Oral Health of LA County's Adolescents 12-17 Years

Condition of teeth

ORAL HEALTH OF LA COUNTY'S ADOLESCENTS 12-17 Years
DATA-AT-A-GLANCE

Indicator	LA County 2007	LA County 2019-2020	California 2019-2020	United States 2019-2020
Self-reported condition of teeth				
Excellent/very good	47%	57%	57%	NA
Good	40%	28%	32%	NA
Fair/poor	13%	15%	12%	NA
Parent-reported condition of teeth				
Excellent/very good	NA	NA	NA	76%
Good	NA	NA	NA	18%
Fair/poor	NA	NA	NA	6%

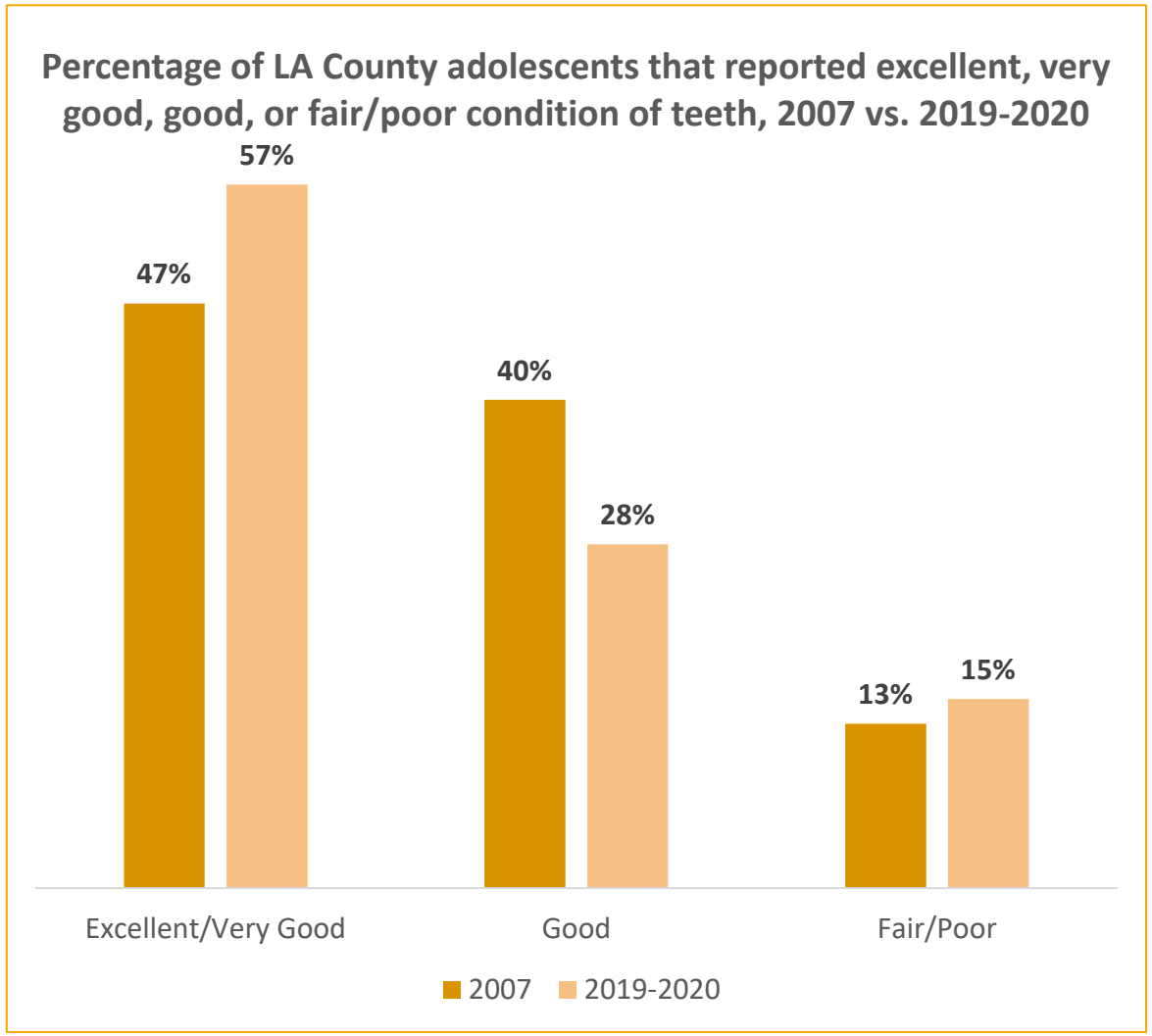
Self-Reported Condition of Teeth - Overall Prevalence



- Compared to the United States average, a lower percentage of LA County and California adolescents reported that the condition of their teeth was excellent/very good
  - **IMPORTANT NOTE:** US data is from the National Survey of Children's Health which asks ***parents*** to rate the oral health of their child's teeth. LA County and California data is from the California Health Interview Survey which asks the ***adolescent*** to rate the condition of their own teeth.

- Data Sources: California Health Interview Survey, 2019-2020 pooled, https://ask.chis.ucla.edu/; National Survey of Children's Health, 2019-2020, https://www.childhealthdata.org/

Self-Reported Condition of Teeth - Trends



- Since 2007, there has been an increase in the percentage of adolescents that report excellent or very good condition of teeth

- Data Source: California Health Interview Survey, 2007 and 2019-2020 pooled, https://ask.chis.ucla.edu/

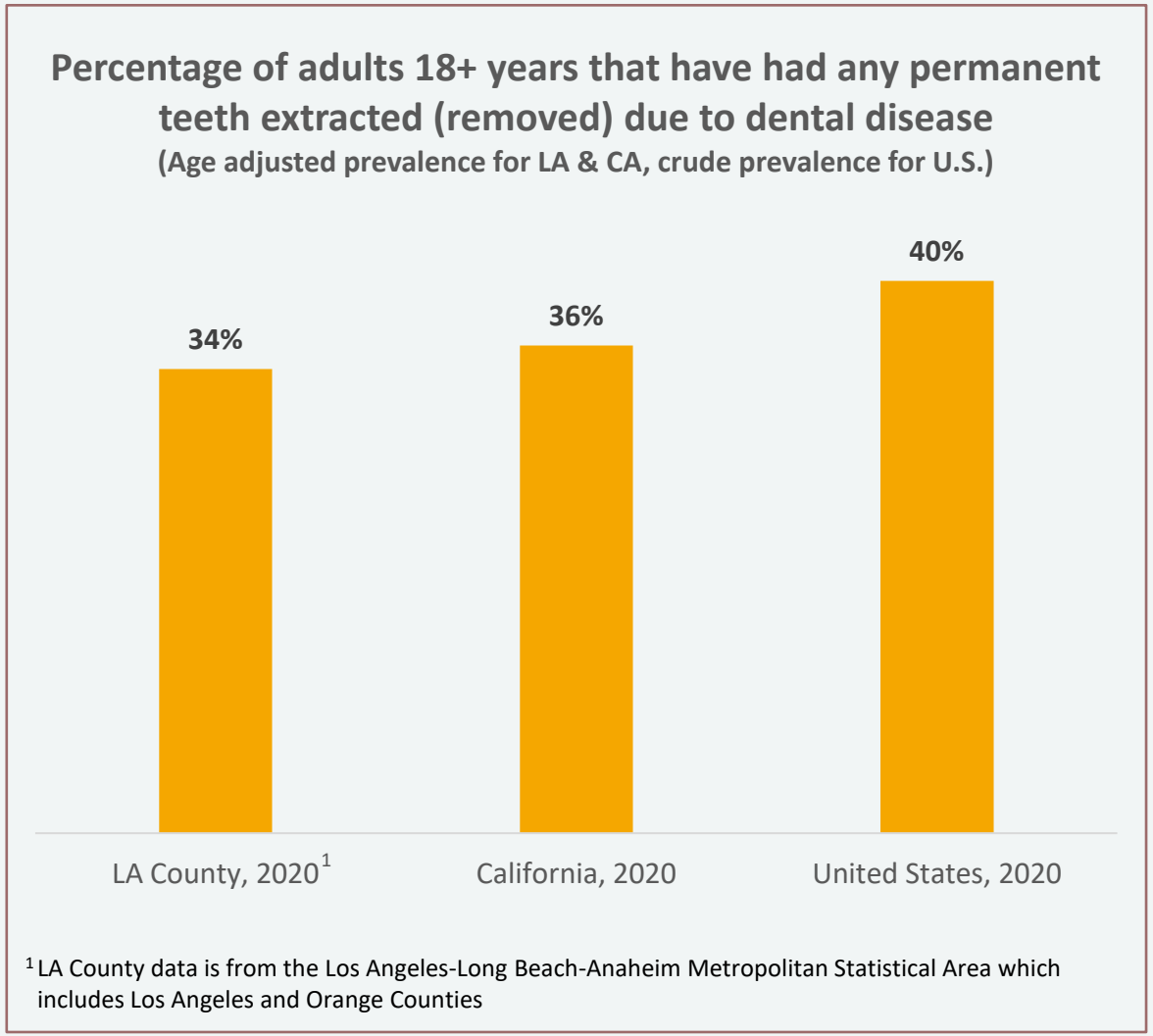
Oral Health of Adults in LA County

Any tooth loss in adults 18+
Total tooth loss in adults 65+
Self-reported condition of teeth
Oral and pharyngeal cancer

ORAL HEALTH OF ADULTS IN LA COUNTY
DATA-AT-A-GLANCE

Age/Indicator	LA County	California	United States
18+ Years			
Any tooth loss	34% (2020)	36% (2020)	40% (2020)
Fair/poor self-reported condition of teeth	29% (2020)	26% (2020)	NA
65+ Years			
Total tooth loss	11% (2020)	9% (2020)	13% (2020)
All Ages			
Incidence of oral & pharyngeal cancer (annual age adjusted rate per 100,000)	8.6 (2014-2018)	10.1 (2014-2018)	11.9 (2014-2018)
Mortality from oral & pharyngeal cancer (annual age adjusted rate per 100,000)	2.3 (2015-2019)	2.4 (2015-2019)	2.5 (2015-2019)

Any Tooth Loss in Adults 18+ Years – Overall Prevalence

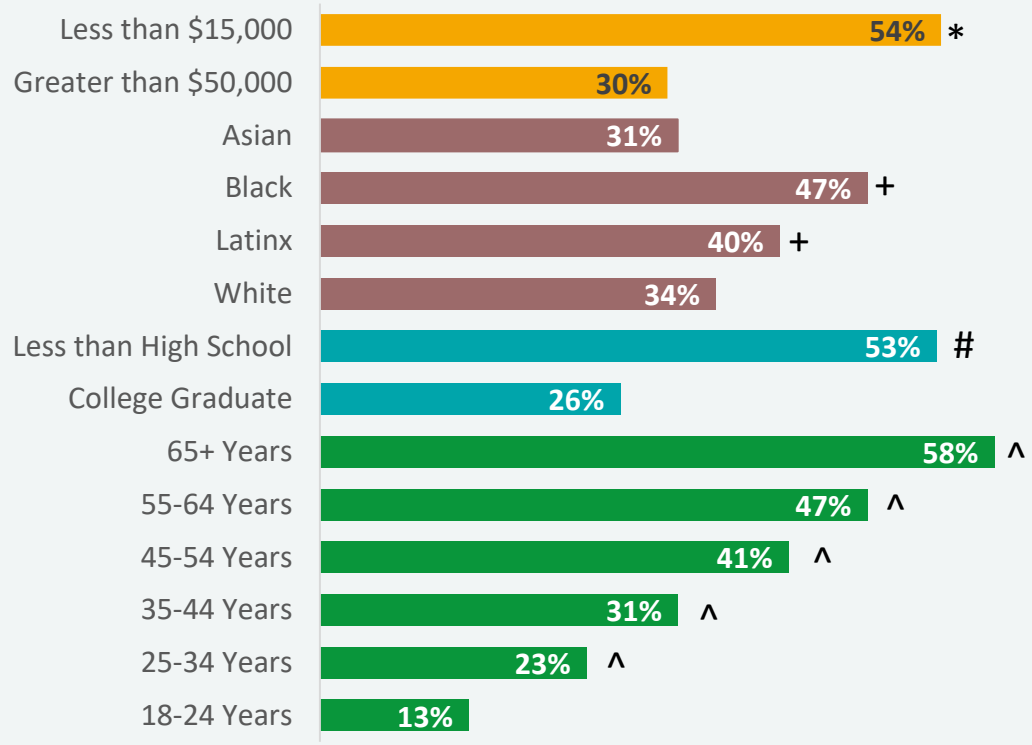


- The percentage of adults in LA County and California that have had any permanent teeth removed is lower than the national average

- Any tooth loss means that the person has had one or more permanent (adult) teeth extracted (removed) because of dental disease (does not include teeth removed because of orthodontics or injury).
- Data Source: Behavioral Risk Factor Surveillance System (BRFSS), 2020, https://www.cdc.gov/brfss/brfssprevalence/

Any Tooth Loss in Adults – California[1] Disparities

Percentage of California[1] adults aged 18+ years with any tooth loss by income, race/ethnicity, education, and age, 2020



*Significantly higher prevalence than > $50,000
+Significantly higher prevalence than White adults
#Significantly higher prevalence than college graduates
^Significantly higher prevalence than adults 18-24 years

Lower income adults are significantly more likely to have missing teeth compared to higher income adults

Black/African American and Latinx adults are significantly more likely to have missing teeth compared to White adults

Adults with less than a high school education are significantly more likely to have missing teeth compared to adults with a college degree

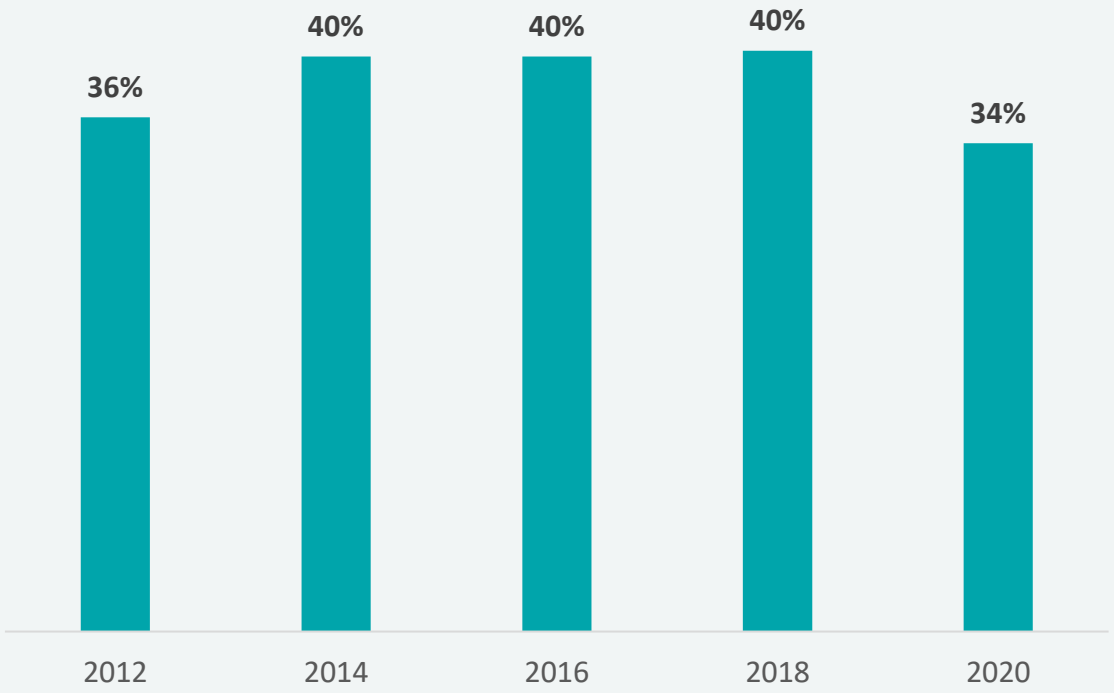
The percentage of adults with missing teeth increases significantly with age

[1] Because of small sample sizes, LA County data is not available

- Any tooth loss means that the person has had one or more permanent (adult) teeth extracted (removed) because of dental disease (does not include teeth removed because of orthodontics or injury).
- Data Sources: Behavioral Risk Factor Surveillance System (BRFSS), 2020, https://www.cdc.gov/brfss/brfssprevalence/

Any Tooth Loss in Adults – LA County Trends

Percentage of LA County[1] adults 18+ years that have had any permanent teeth extracted due to dental disease by year[2]

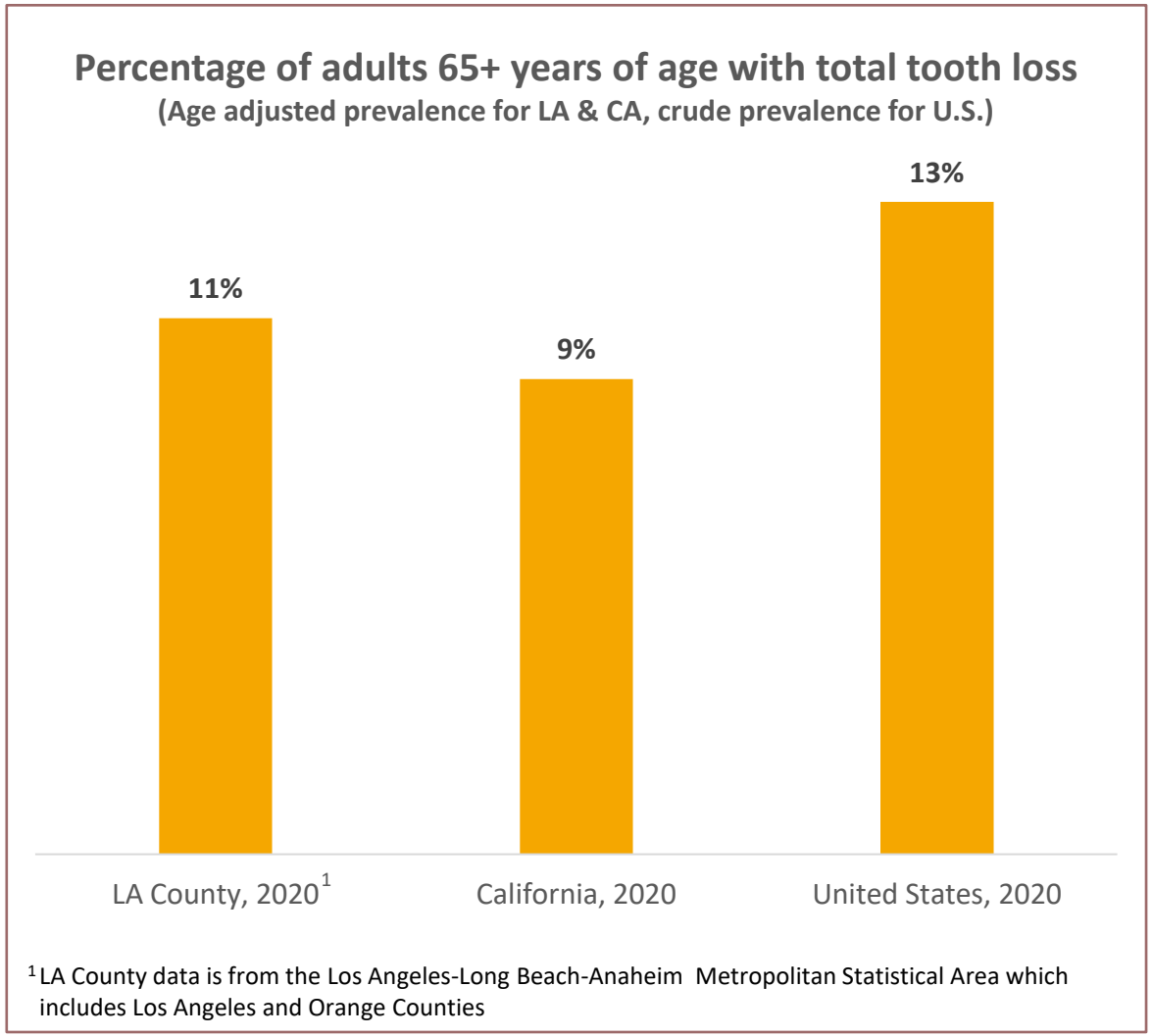


[1] LA County data is from the Los Angeles-Long Beach-Anaheim Metropolitan Statistical Area which includes Los Angeles and Orange Counties
[2] Age adjusted

- Since 2012, the percentage of adults that have had any permanent teeth removed has remained stable

- Any tooth loss means that the person has had one or more permanent (adult) teeth extracted (removed) because of dental disease (does not include teeth removed because of orthodontics or injury).
- Data Source: Behavioral Risk Factor Surveillance System (BRFSS), 2012-2020, https://www.cdc.gov/brfss/brfssprevalence/

Total Tooth Loss in Adults 65+ Years – Overall Prevalence

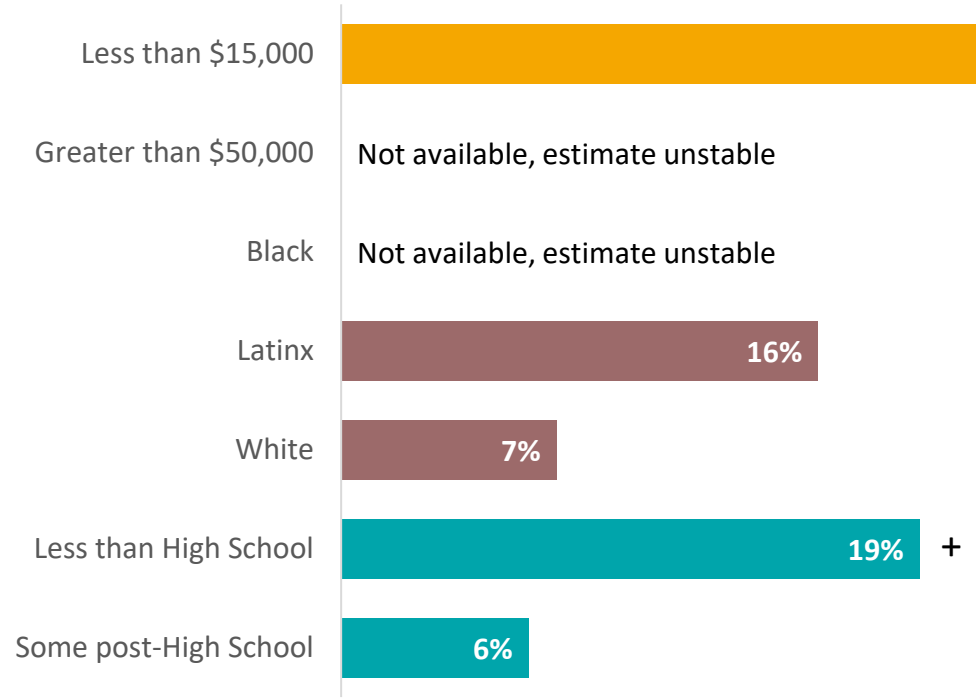


- The prevalence of total tooth loss is similar for LA County, California and the US

- Total tooth loss means that the person had no natural teeth (all teeth have been removed). People with no teeth are referred to as edentulous.
- Data Sources: Behavioral Risk Factor Surveillance System (BRFSS), 2020, https://www.cdc.gov/brfss/brfssprevalence/

Total Tooth Loss in Adults 65+ Years – California[1] Disparities

Percentage of California[1] adults aged 65+ years with total tooth loss by income, race/ethnicity, and education, 2020



+Significantly higher prevalence than college graduate

Compared to the state average (9%), lower income adults are more likely to have no natural teeth

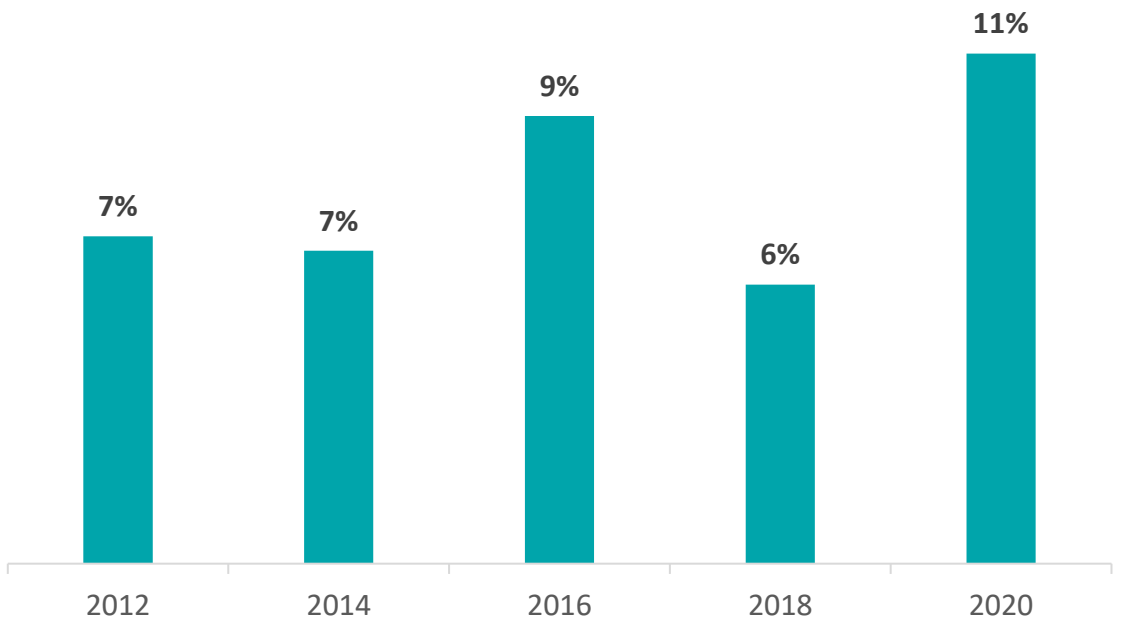
Adults with less than a high school education are significantly more likely to have no natural teeth compared to adults with some post-high school education

[1] Because of small sample sizes, LA County data is not available

- Total tooth loss means that the person had no natural teeth (all teeth have been removed). People with no teeth are referred to as edentulous.
- Data Sources: Behavioral Risk Factor Surveillance System (BRFSS), 2020, https://www.cdc.gov/brfss/brfssprevalence/

Total Tooth Loss in Adults 65+ Years – LA County Trends

Percentage of LA County[1] adults aged 65+ years that have had all permanent teeth extracted by year[2]

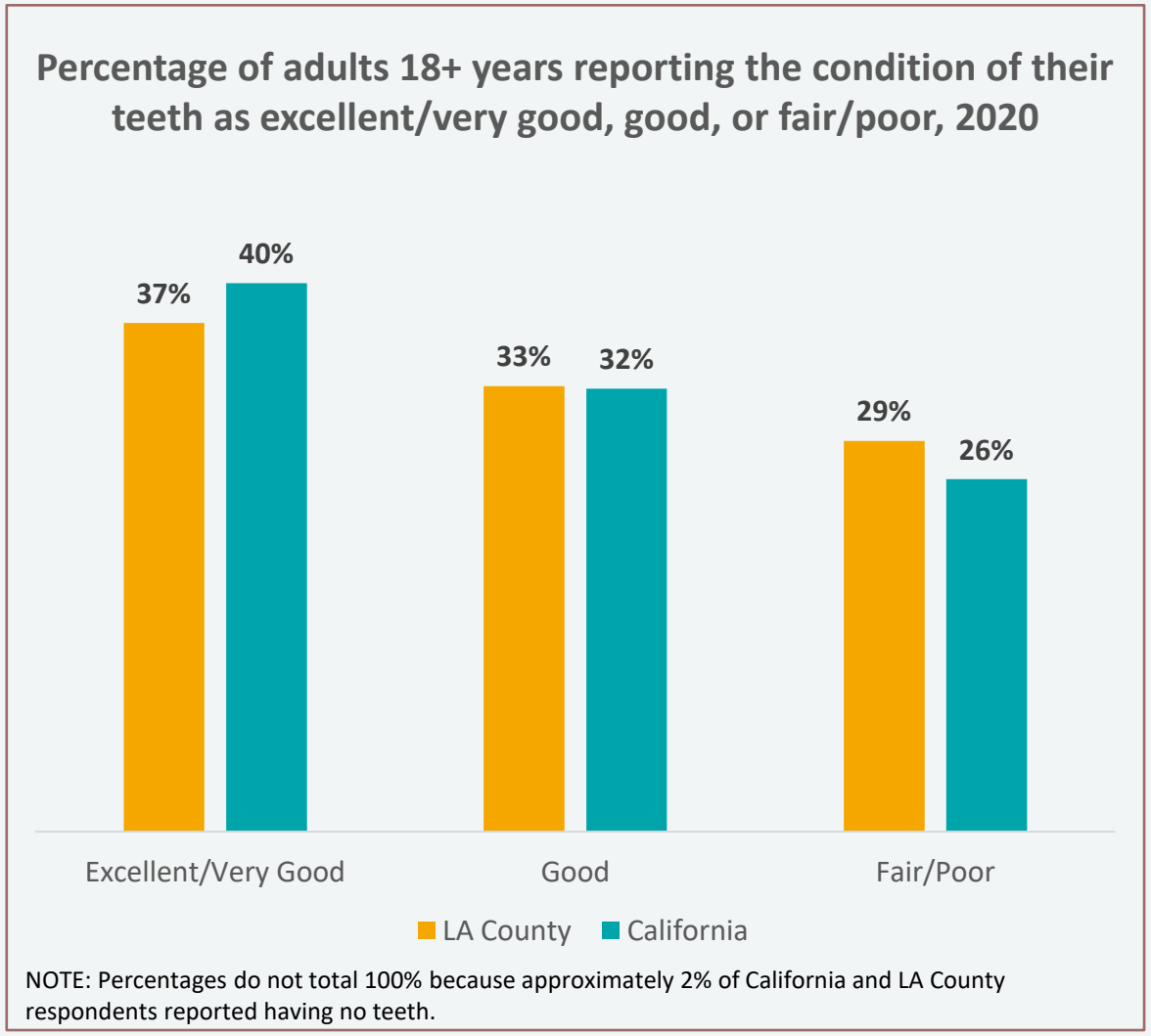


[1] LA County data is from the Los Angeles-Long Beach-Anaheim Metropolitan Statistical Area which includes Los Angeles and Orange Counties
[2] Age adjusted

- Since 2012, the percentage of older adults that have had all their teeth removed has remained stable

- Total tooth loss means that the person has no natural teeth (all teeth have been removed). People with no teeth are referred to as edentulous.
- Data Source: Behavioral Risk Factor Surveillance System (BRFSS), 2012-2020, https://www.cdc.gov/brfss/brfssprevalence/

Self-Reported Condition of Teeth – Overall Prevalence

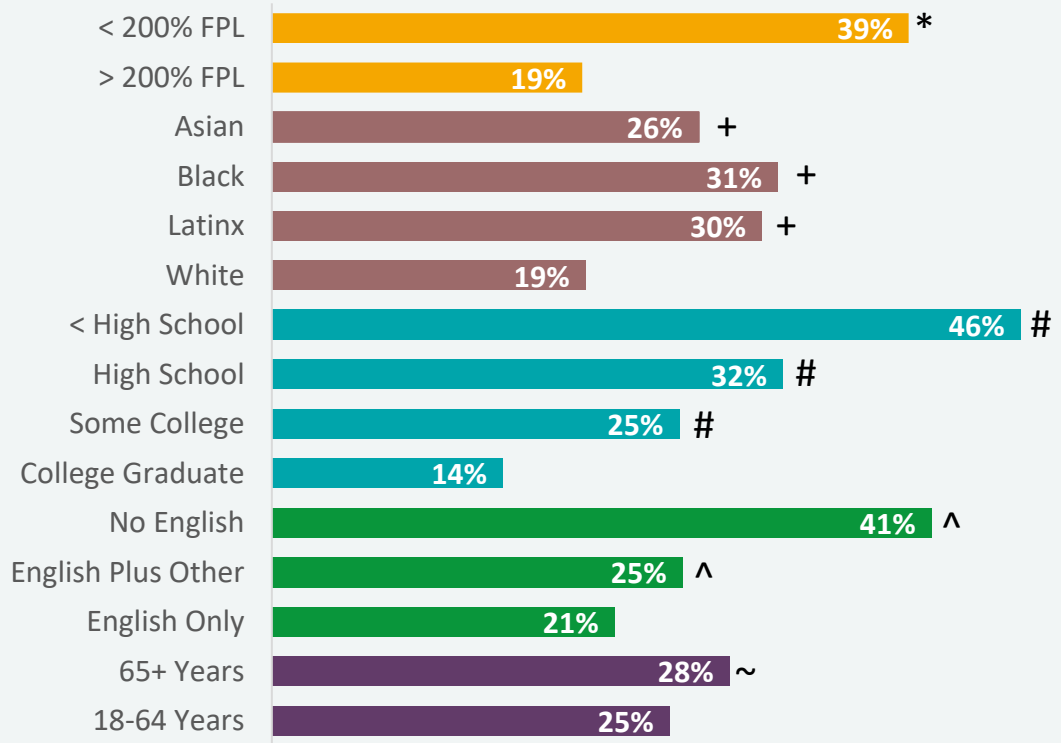


- More than 1-of-4 adults in California and LA County report the condition of their teeth as fair/poor
- Data for the United States is not available

- Data Source: California Health Interview Survey, 2020, https://ask.chis.ucla.edu/

Self-Reported Condition of Teeth – LA County Disparities

Percentage of LA County adults aged 18+ years that report fair/poor condition of teeth by select characteristics, 2019-2020



*Significantly higher than > 200% FPL
+Significantly higher than White adults
#Significantly higher than college graduates
^Significantly higher than adults that speak only English
~Significantly higher than adults 18-64 years

Lower income adults are significantly more likely to report fair/poor condition of teeth compared to higher income adults

Asian, Black/African American and Latinx adults are significantly more likely to report fair/poor condition of teeth compared to White adults

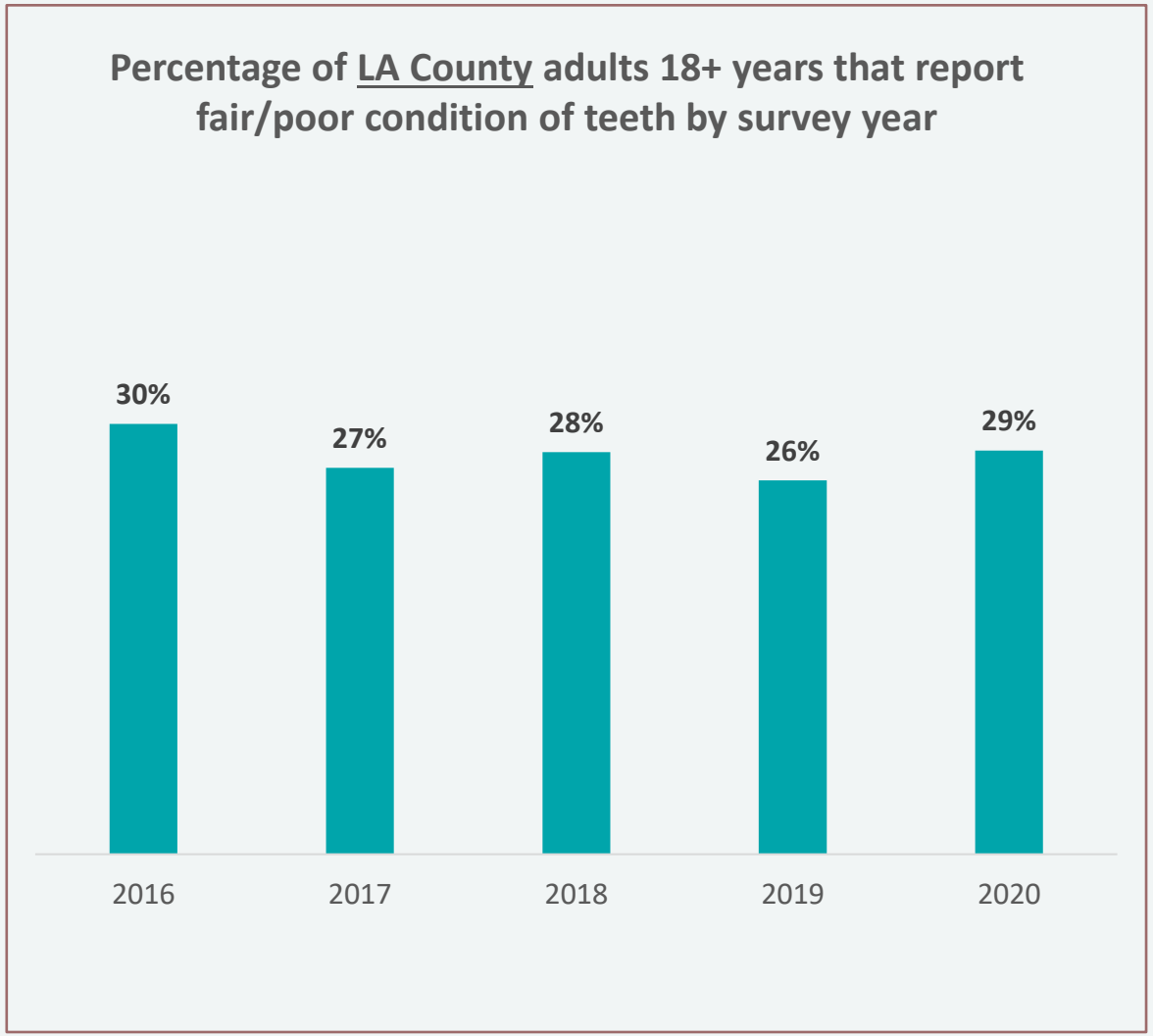
Adults with less than a college degree are significantly more likely to report fair/poor condition of teeth compared to adults with a college degree

Adults that speak non-English languages at home are significantly more likely to report fair/poor condition of teeth compared to adults that speak only English

Older adults are significantly more likely to report fair/poor condition of teeth compared to younger adults aged 18-64 years

- Data Source: California Health Interview Survey, 2019-2020 pooled, https://ask.chis.ucla.edu/

Self-Reported Condition of Teeth – LA County Trends

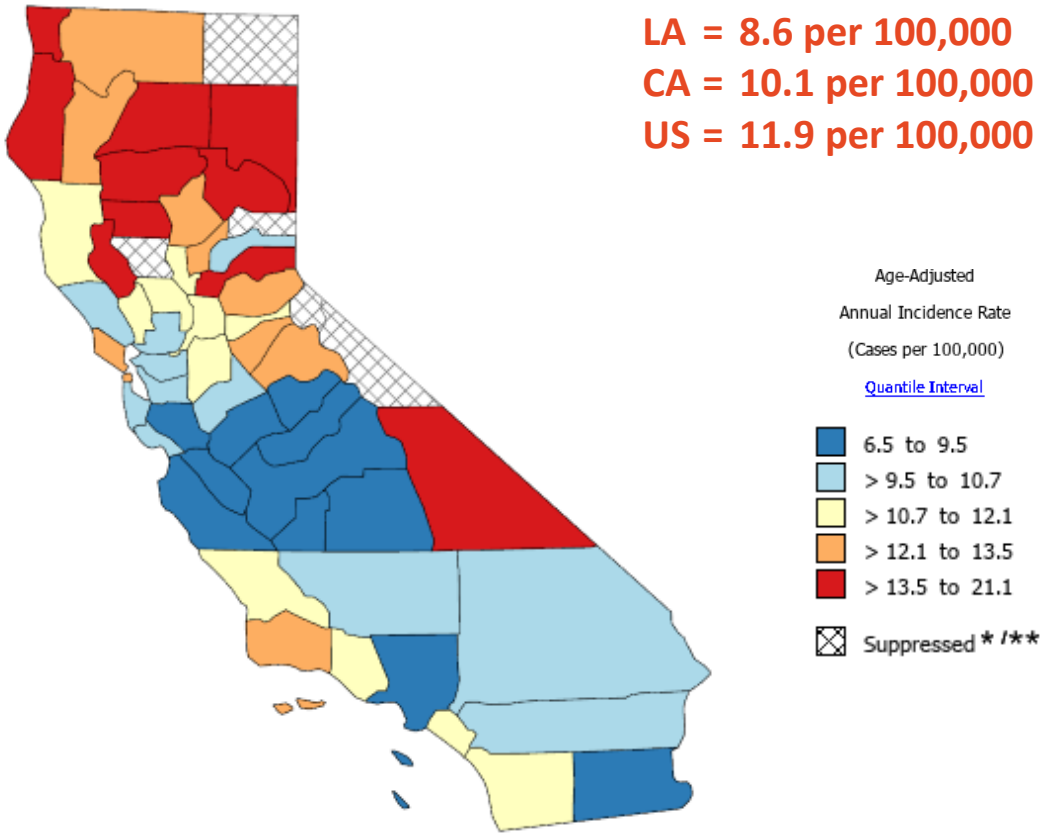


- Since 2016, the percentage of adults that report fair/poor condition of teeth has remained stable

- Data Source: California Health Interview Survey, 2016-2020, https://ask.chis.ucla.edu/

Oral and Pharyngeal Cancer – Overall Incidence & Disparities

Age-adjusted[1] incidence of oral and pharyngeal cancer in California by county, 2014-2018



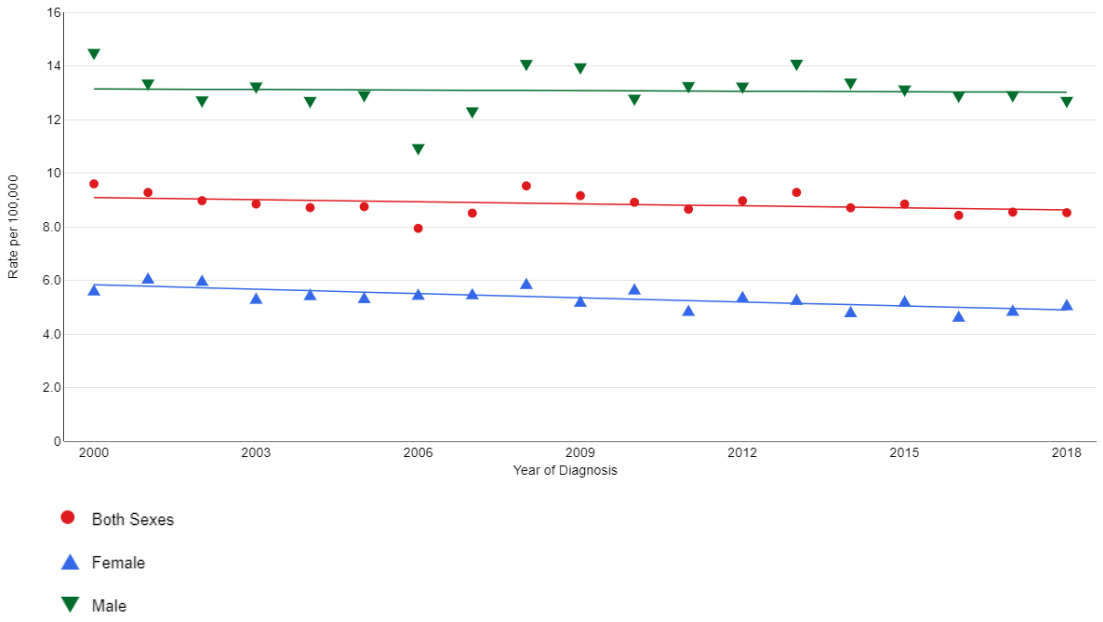
- The age-adjusted[1] incidence of oral and pharyngeal cancer is lower in Los Angeles County than in California or the US
- LA County disparities, 2014-2018 (per 100,000)
  - Females (all races/all ages) 4.9
  - Males (all races/all ages) 12.9
  - Asian (both sexes/all ages) 7.0
  - Black (both sexes/all ages) 8.0
  - Latinx (both sexes/all ages) 5.7
  - White (both sexes/all ages) 12.0

[1] Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.

- Cancers that occur in the oral cavity (mouth) and throat
- Data Sources: National Cancer Institute, State Cancer Profiles, 2014-2018, https://statecancerprofiles.cancer.gov/; California Cancer Registry, California Department of Public Health, CAL*Explorer, https://explorer.ccrcal.org/

Oral and Pharyngeal Cancer – LA County Trends (Incidence)

Age-adjusted[1] incidence of oral and pharyngeal cancer in LA County by sex and year (all races, all ages)



- Females
  - Incidence has been falling since 2009
- Males
  - Incidence has been stable since 2009

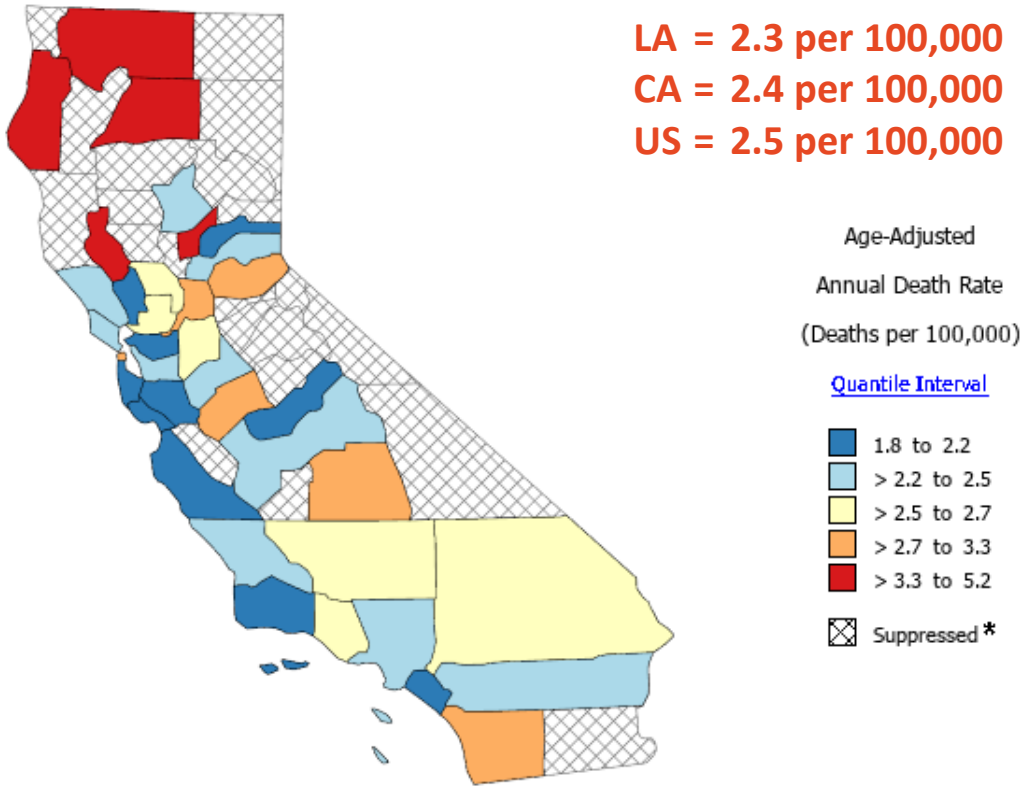
Sex	Annual Percent Change – LA County			
	Year Range	Estimate (%)	P-Value	Direction
Female	2009-2018	-1.0	<0.01	↓Falling
	2014-2018	-1.0	<0.01	↓Falling
Male	2009-2018	-0.1	0.84	Stable
	2014-2018	-0.1	0.84	Stable

[1] Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.

- Cancers that occur in the oral cavity (mouth) and throat
- Data Source: California Cancer Registry, California Department of Public Health, CAL*Explorer, https://explorer.ccrcal.org/

Oral and Pharyngeal Cancer – Mortality & Disparities

Age-adjusted[1] death rate from oral and pharyngeal cancer in California by county, 2015-2019



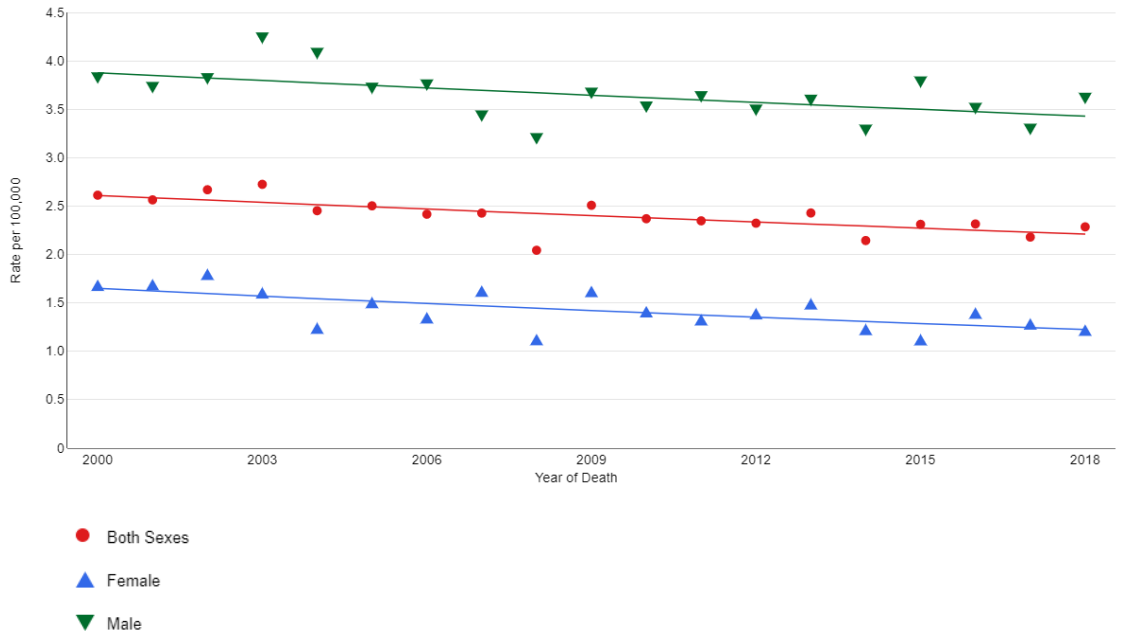
- The age-adjusted[1] death rate from oral and pharyngeal cancer is lower in Los Angeles County than in California or the US
- LA County disparities, 2014-2018 (per 100,000)
  - Females (all races/all ages) 1.2
  - Males (all races/all ages) 3.5
  - Asian (both sexes/all ages) 2.2
  - Black (both sexes/all ages) 2.3
  - Latinx (both sexes/all ages) 1.6
  - White (both sexes/all ages) 2.8

[1] Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.

- Cancers that occur in the oral cavity (mouth) and throat
- Data Sources: National Cancer Institute, State Cancer Profiles, 2015-2019, https://statecancerprofiles.cancer.gov/; California Cancer Registry, California Department of Public Health, CAL*Explorer, 2014-2018, https://explorer.ccrcal.org/

Oral and Pharyngeal Cancer – LA County Trends (Mortality)

Age-adjusted[1] death rates from oral and pharyngeal cancer in LA County by sex and year (all races, all ages)



- Death rates are falling for both females and males

Sex	Annual Percent Change – LA County			
	Year Range	Estimate (%)	P-Value	Direction
Both Sexes	2000-2018	-0.9	<0.01	↓Falling
Female	2000-2018	-1.6	<0.01	↓Falling
Male	2000-2018	-0.7	0.01	↓Falling

[1] Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.

- Cancers that occur in the oral cavity (mouth) and throat
- Data Source: California Cancer Registry, California Department of Public Health, CAL*Explorer, https://explorer.ccrcal.org/

Use of the Dental Care Delivery System

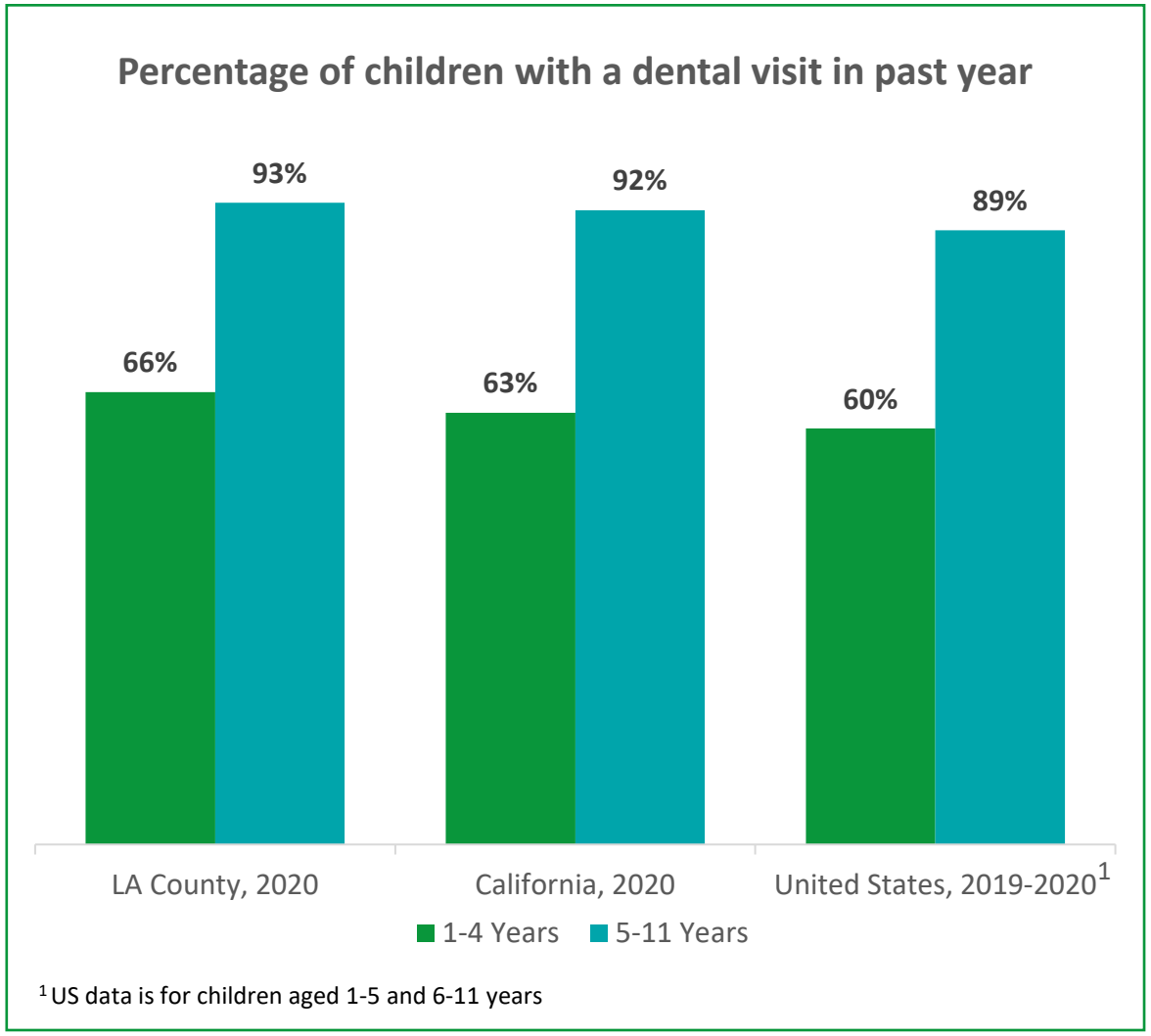
Children 1-11 Years
Adults 18+ Years
Adults 18+ Years with Diabetes
Medicaid (Medi-Cal) Enrollees

USE OF THE DENTAL CARE DELIVERY SYSTEM
DATA-AT-A-GLANCE

Indicator/Population Group	LA County	California	United States
Dental visit in past year (self-report)	Percentage (Year)	Percentage (Year)	Percentage (Year)
Children 1-4 years	66% (2020)	63% (2020)	60% (2019-2020)^
Children 5-11 years	93% (2020)	92% (2020)	89% (2019-2020)^
Adolescents 12-17 years*	92% (2020)	89% (2020)	88% (2019-2020)
Adults 18+ Years	63% (2020)	67% (2020)	67% (2020)
Adults 18+ years with diabetes	58% (2020)	62% (2020)	60% (2020)
Dental visit during pregnancy (self-report)			
Pregnant women	41% (2019-2020)	44% (2019-2020)	Not Available
Dental visit during calendar/fiscal year (claims data)			
Medicaid enrollees 0-20 years	43% (CY2020)	41% (CY2020)	43% (FY2020)
Medicaid enrollees 21+ years	22% (CY2020)	21% (CY2020)	Not Available
Used free community or public dental programs			
Children 1-4 years	14% (2020)	12% (2020)	Not Available
Children 5-11 years	14% (2020)	16% (2020)	Not Available

* LA County and California data was obtained from the adolescent while US data was obtained from the parent
^ US data is for children 1-5 years and children 6-11 years

Dental Visit in Past Year Among Children – Overall Prevalence



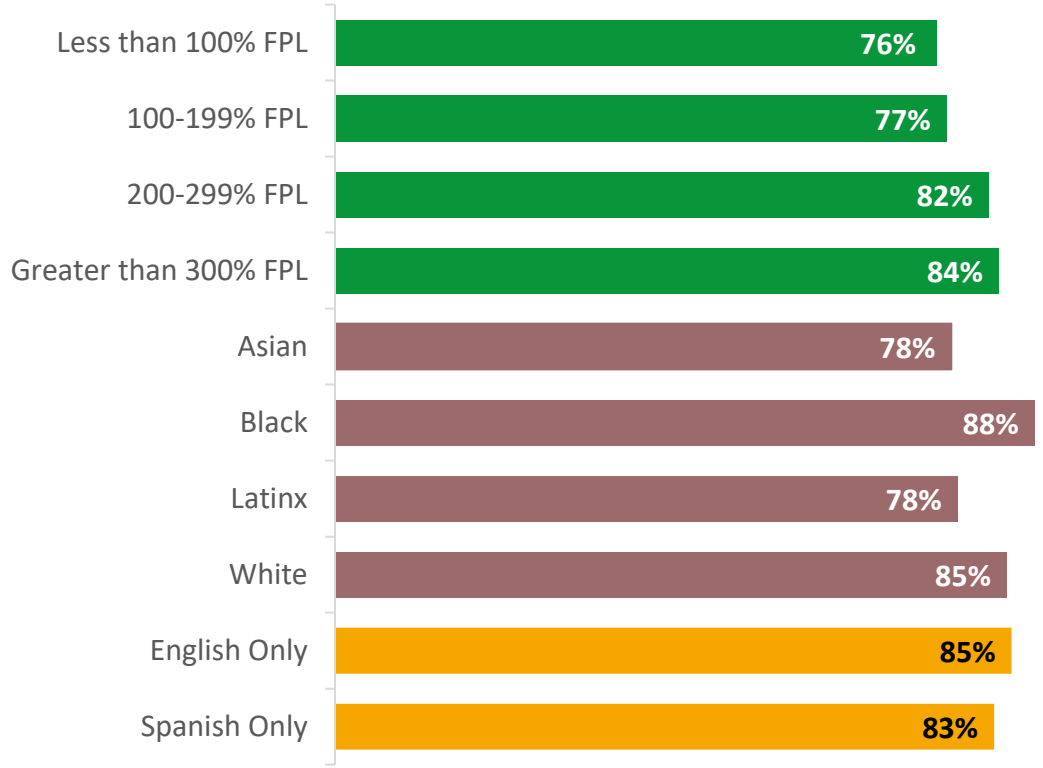
[1] US data is for children aged 1-5 and 6-11 years

- The percentage of children with a dental visit in the past year is similar for LA County, California and the US
- Most parents report that their child aged 5-11 years had a dental visit in the past year

- Data Sources: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/; National Survey of Children's Health, 2019-2020, https://www.childhealthdata.org/
- CHIS question: asked of all children 3-11 years of age and children under 3 years of age with teeth

Dental Visit in Past Year Among Children – California[1] Disparities

Percentage of California[1] children 1-11 years with a dental visit by income, race/ethnicity, and language spoken at home, 2020



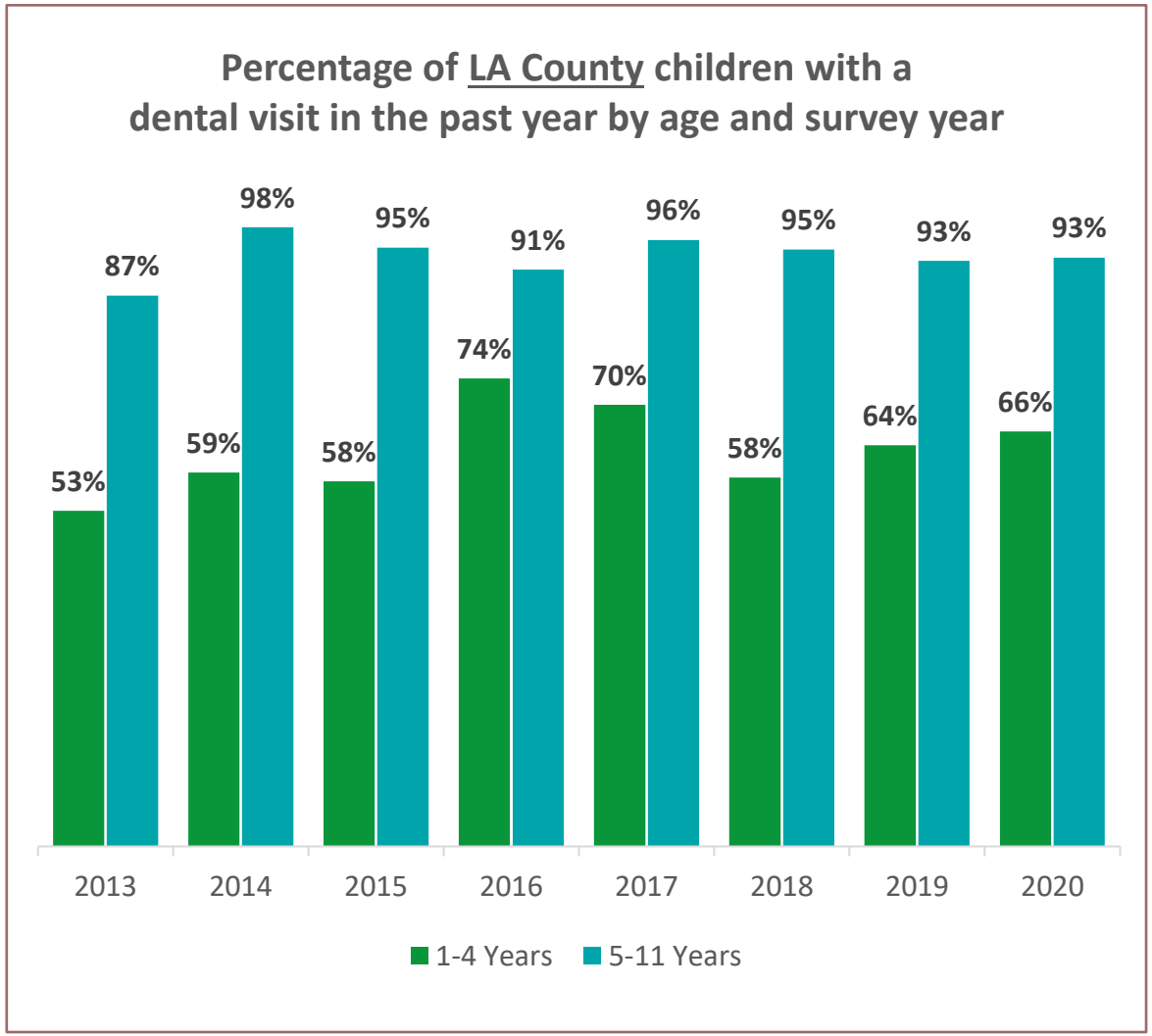
FPL = Federal poverty level

- Data Source: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/
- CHIS question: asked of all children 3-11 years of age and children under 3 years of age with teeth

In California, the percentage of children with a dental visit in the past year does not vary by income, race/ethnicity, or language spoken at home

[1] Because of small sample sizes, LA County data is not available

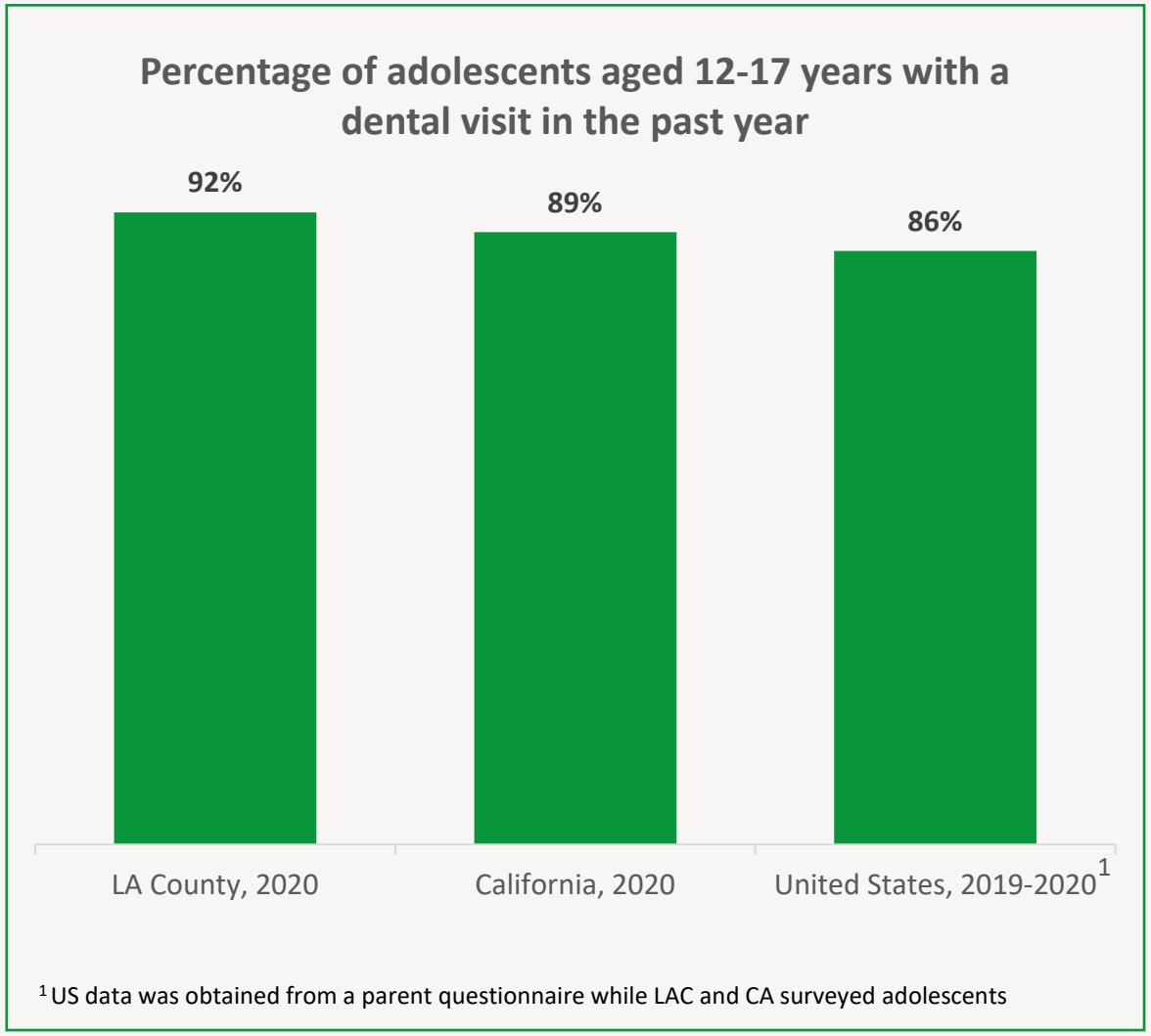
Dental Visit in Past Year Among Children – LA County Trends



- The percentage of children with a dental visit in the past year has not changed significantly since 2013

- Data Source: California Health Interview Survey (CHIS), 2013-2020, https://ask.chis.ucla.edu/
- CHIS question: asked of all children 3-11 years of age and children under 3 years of age with teeth

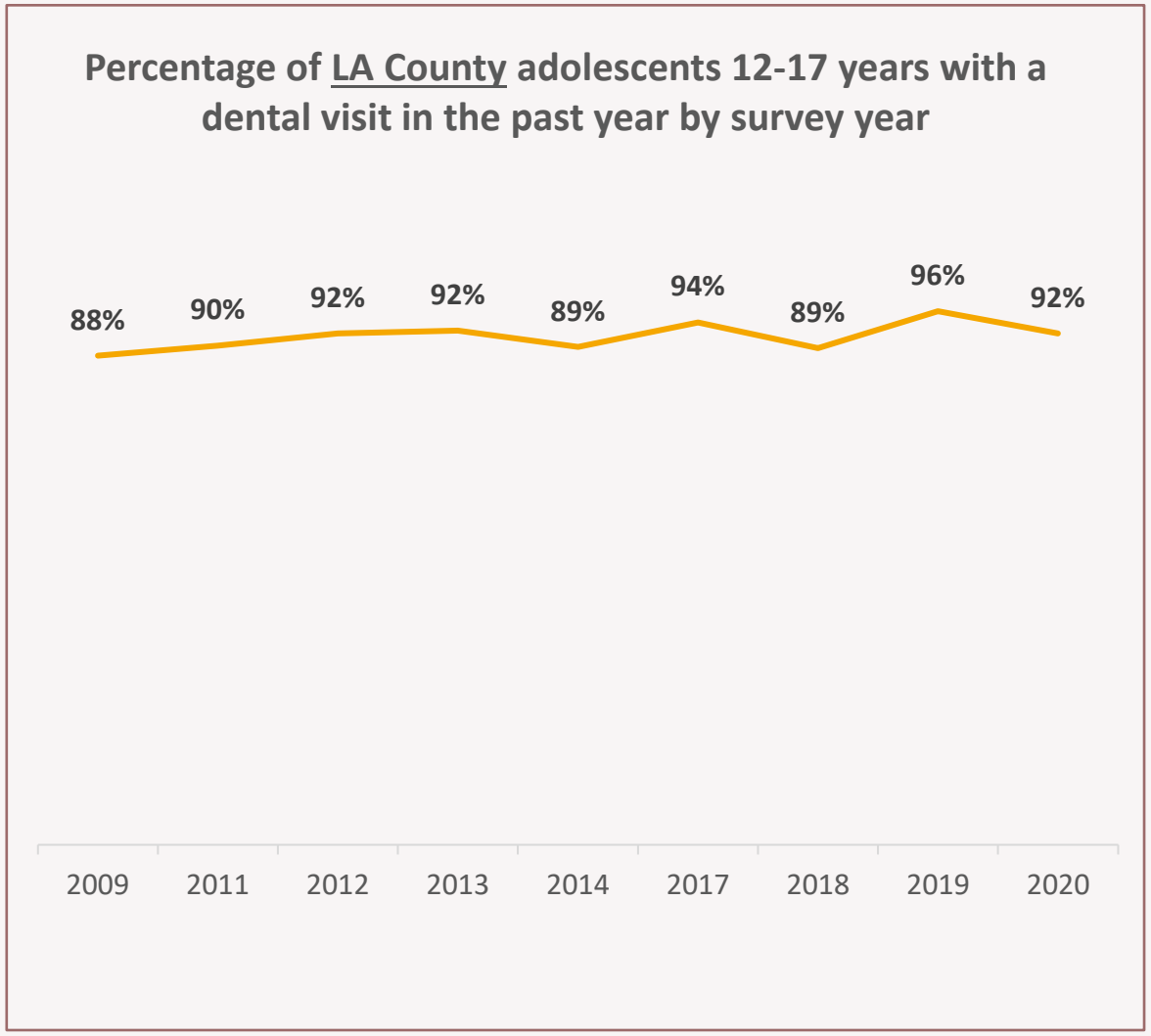
Dental Visit in Past Year Among Adolescents – Overall Prevalence



- Almost all adolescents in LA County and California report a dental visit in the last year
  - **IMPORTANT NOTE:** US data is from the National Survey of Children's Health which asks ***parents*** about last dental visit. LA County and California data is from the California Health Interview Survey which asks the ***adolescent*** about time since last dental visit.

- Data Sources: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/; National Survey of Children's Health, 2019-2020, https://www.childhealthdata.org/
- CHIS question: asked of all adolescents 12-17 years

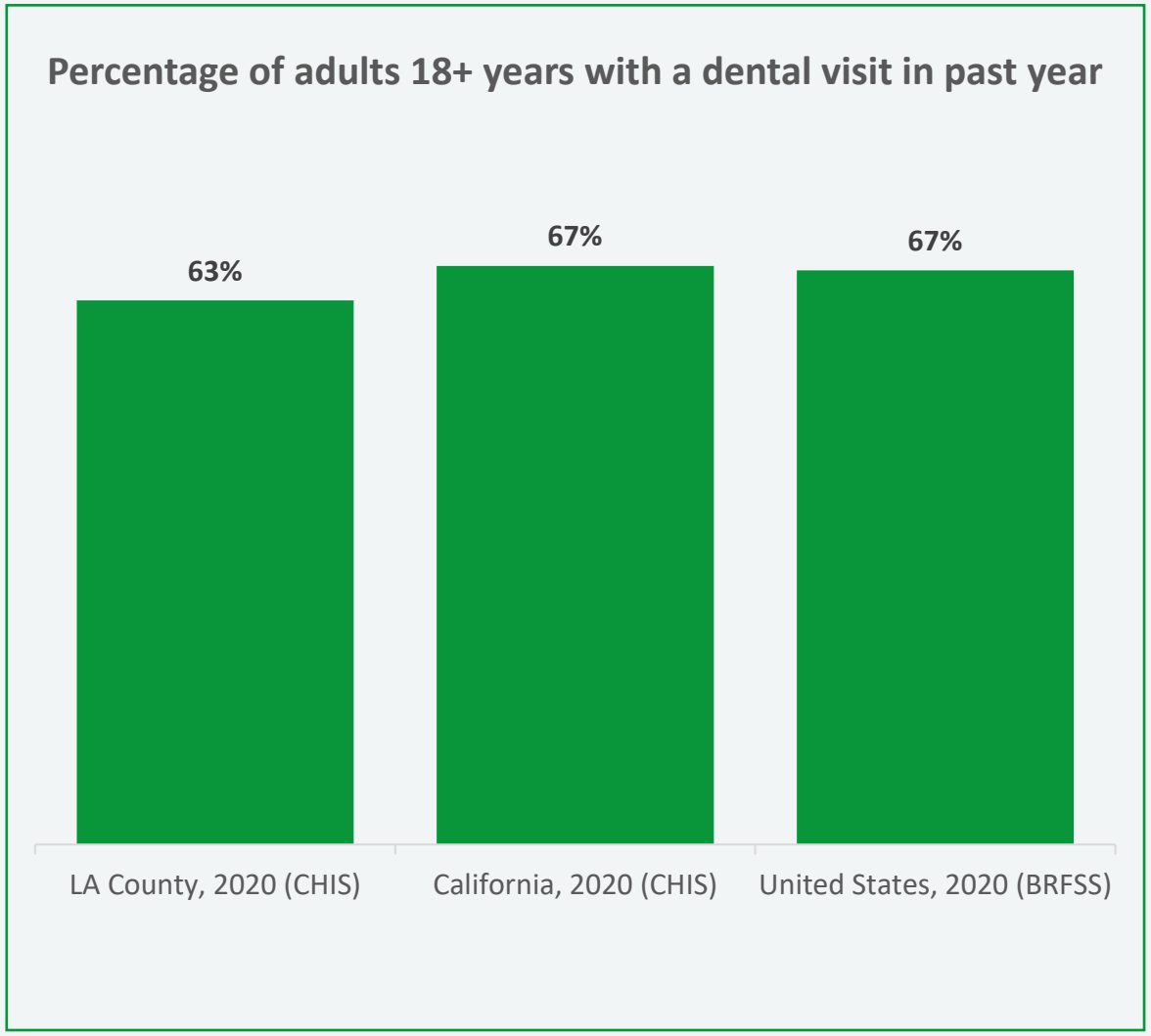
Dental Visit in Past Year Among Adolescents – LA County Trends



- In 2009, 88% of adolescents reported a dental visit in the last year compared to 92% in 2020
- Data on disparities is not presented because of unstable estimates

- Data Source: California Health Interview Survey (CHIS), 2009-2020, https://ask.chis.ucla.edu/
- CHIS question: asked of all adolescents 12-17 years

Dental Visit in Past Year Among Adults – Overall Prevalence

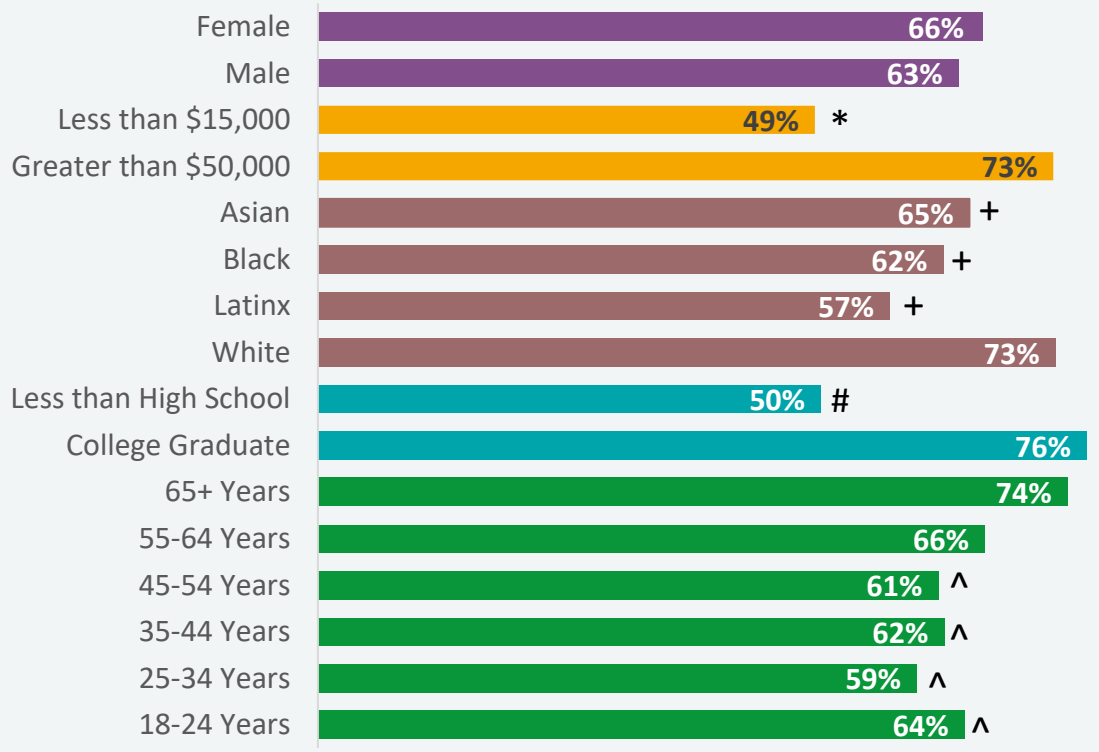


- The percentage of adults with a dental visit in the last year is similar for LA County, California, and the US
- Among LA County adults, the primary reason for their last dental visit was…
  - Routine checkup or cleaning: 69%
  - Specific problem: 20%
  - Both: 11%

- Data Sources: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/; Behavioral Risk Factor Surveillance System (BRFSS), 2020, https://www.cdc.gov/brfss/brfssprevalence/

Dental Visit in Past Year Among Adults – California[1] Disparities

Percentage of California[1] adults aged 18+ years with a dental visit by sex, income, race/ethnicity, education, and age, 2020



*Significantly lower prevalence than > $50,000
+Significantly lower prevalence than White adults
#Significantly lower prevalence than college graduates
^Significantly lower prevalence than adults 65+ years

- Data Sources: Behavioral Risk Factor Surveillance System (BRFSS), 2020, https://www.cdc.gov/brfss/brfssprevalence/

Lower income adults are significantly less likely to have an annual dental visit compared to higher income adults

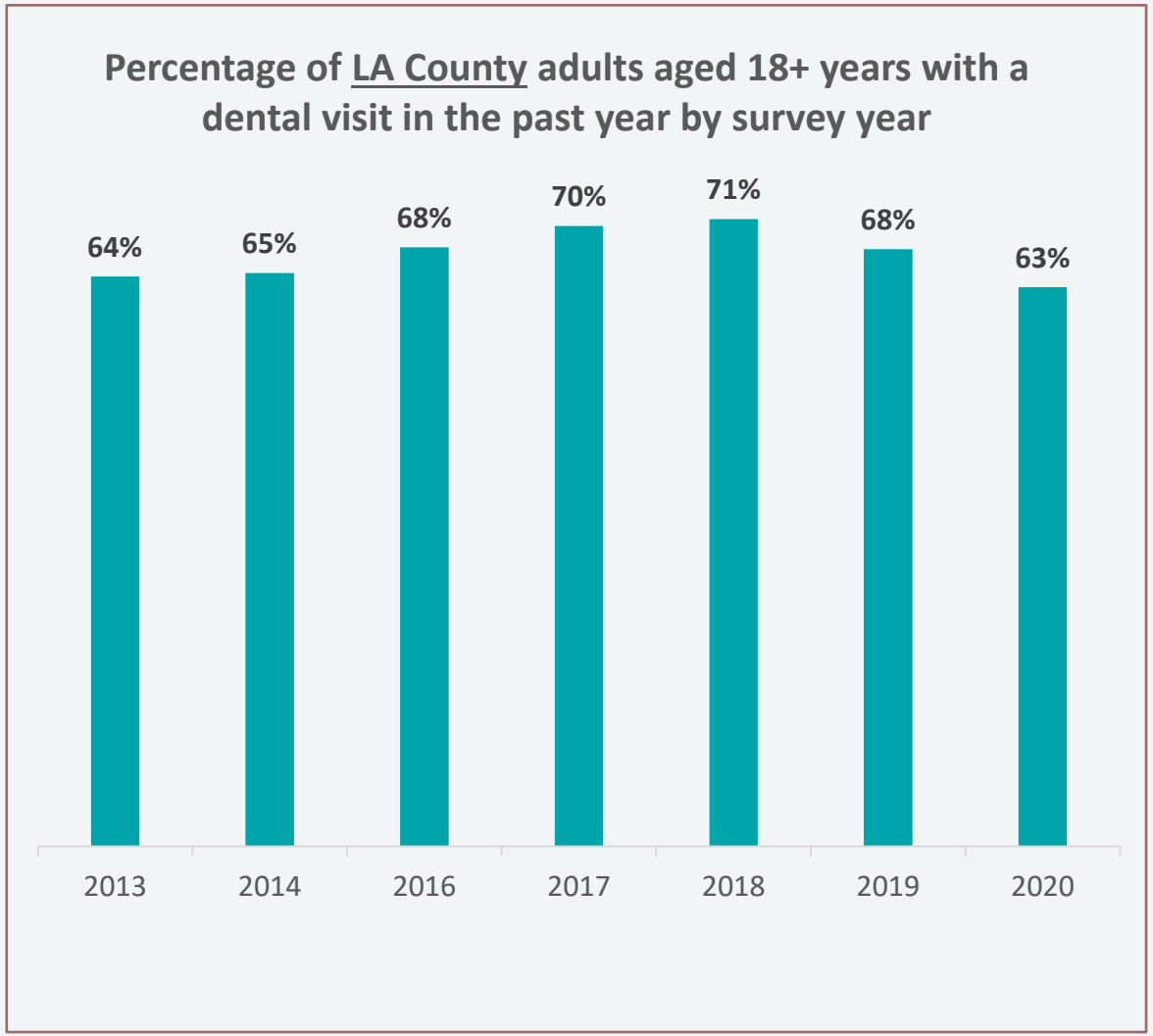
Asian, Black/African American and Latino/Latinx adults are significantly less likely to have an annual dental visit compared to Whites

Adults with less than a high school education are significantly less likely to have an annual dental visit compared to adults with a college degree

Adults less than 54 years are significantly less likely to have an annual dental visit compared to adults 65+ years

[1] Because of small sample sizes, LA County data is not available

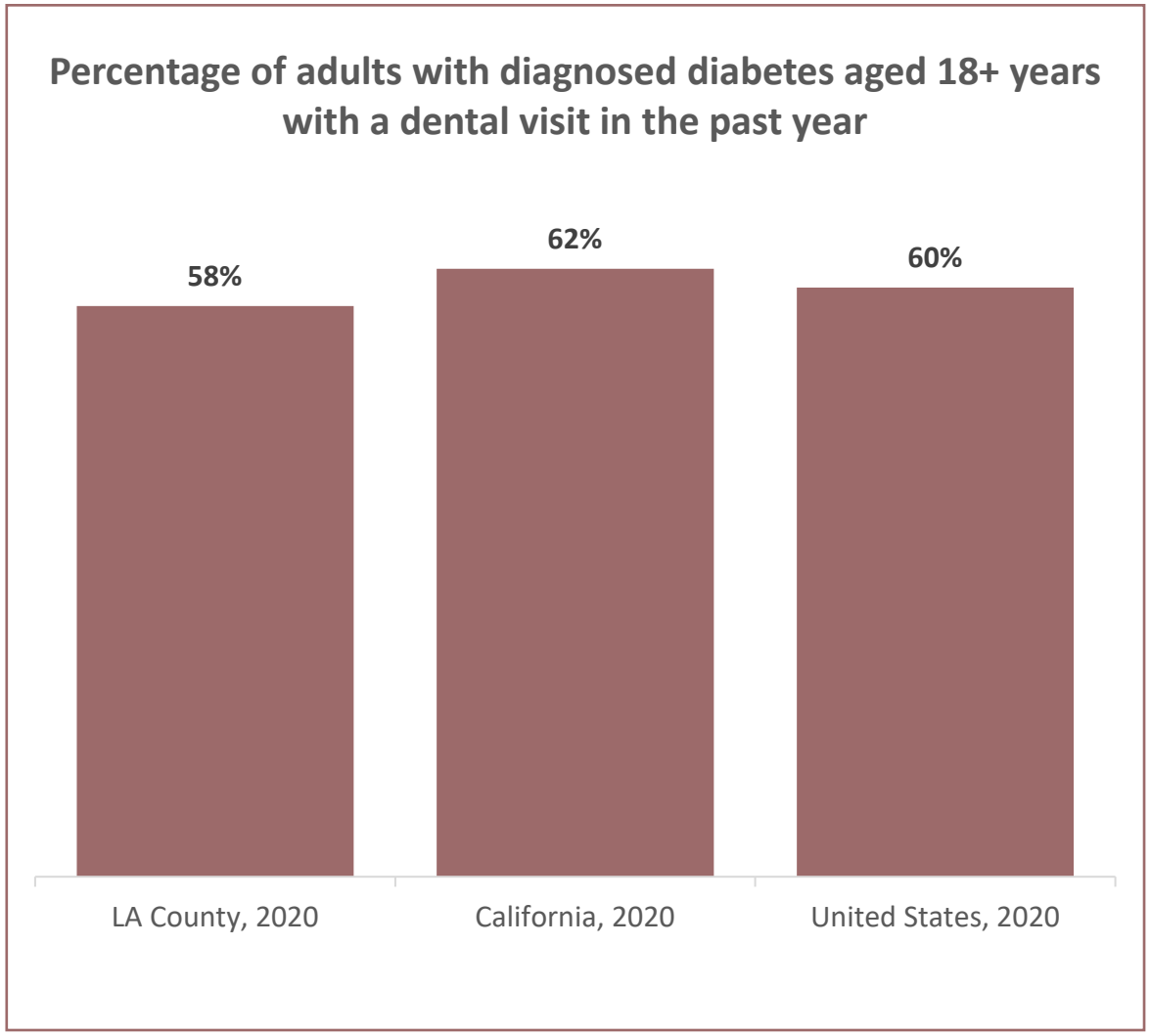
Dental Visit in Past Year Among Adults – LA County Trends



- Approximately 2 out of 3 adults in LA County had a dental visit in the past year

- Data Source: California Health Interview Survey (CHIS), 2013-2020, https://ask.chis.ucla.edu/

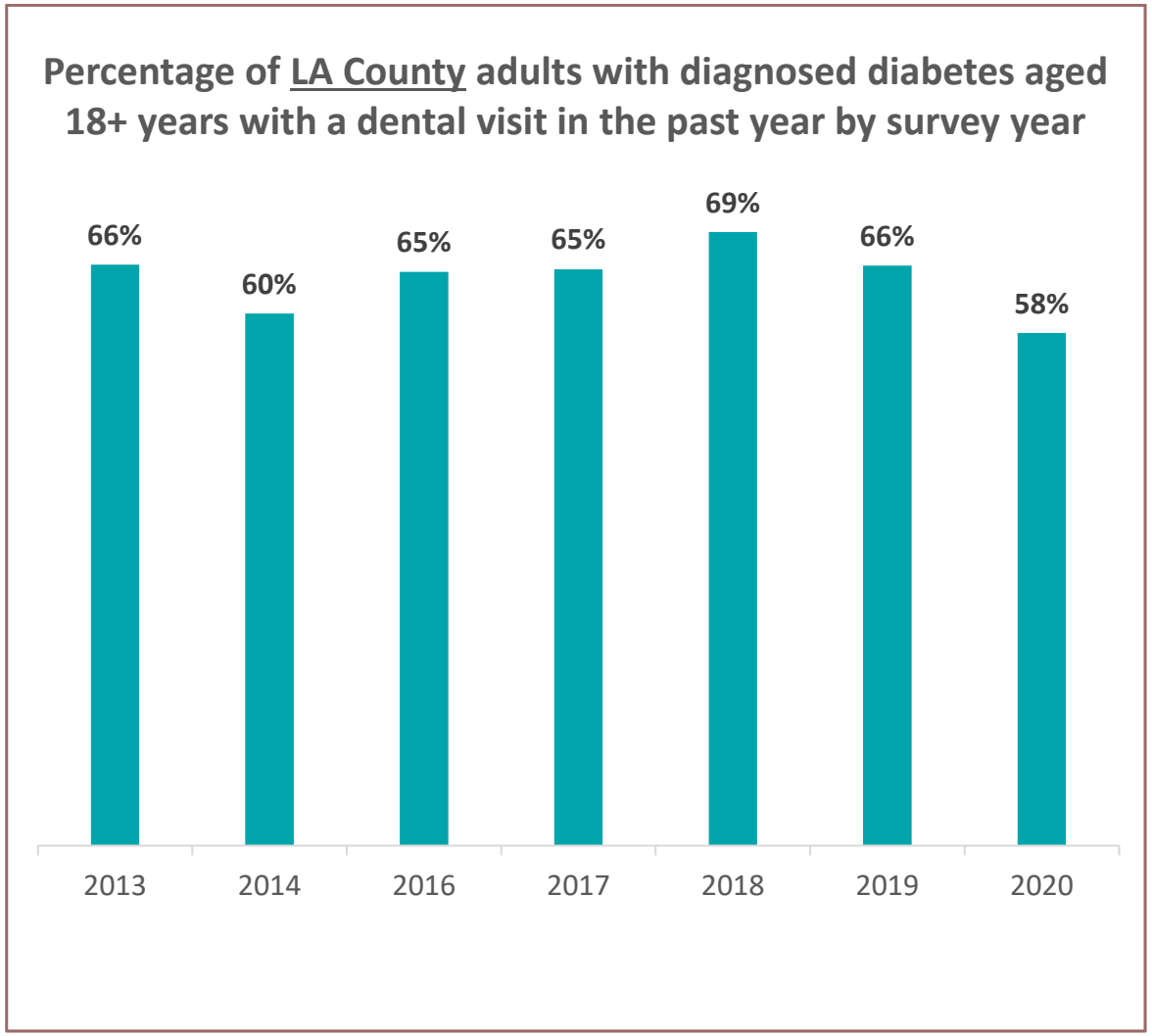
Dental Visit in Past Year Among Adults with Diabetes



- The percentage of adults with diabetes aged 18+ years with a dental visit in the past year is similar for LA County, California and the US
- Information on disparities is not presented because estimates are statistically unstable

- Data Sources: California Health Interview Survey, 2020, https://ask.chis.ucla.edu/; Behavioral Risk Factor Surveillance System, 2020, https://www.cdc.gov/cdi/index.html

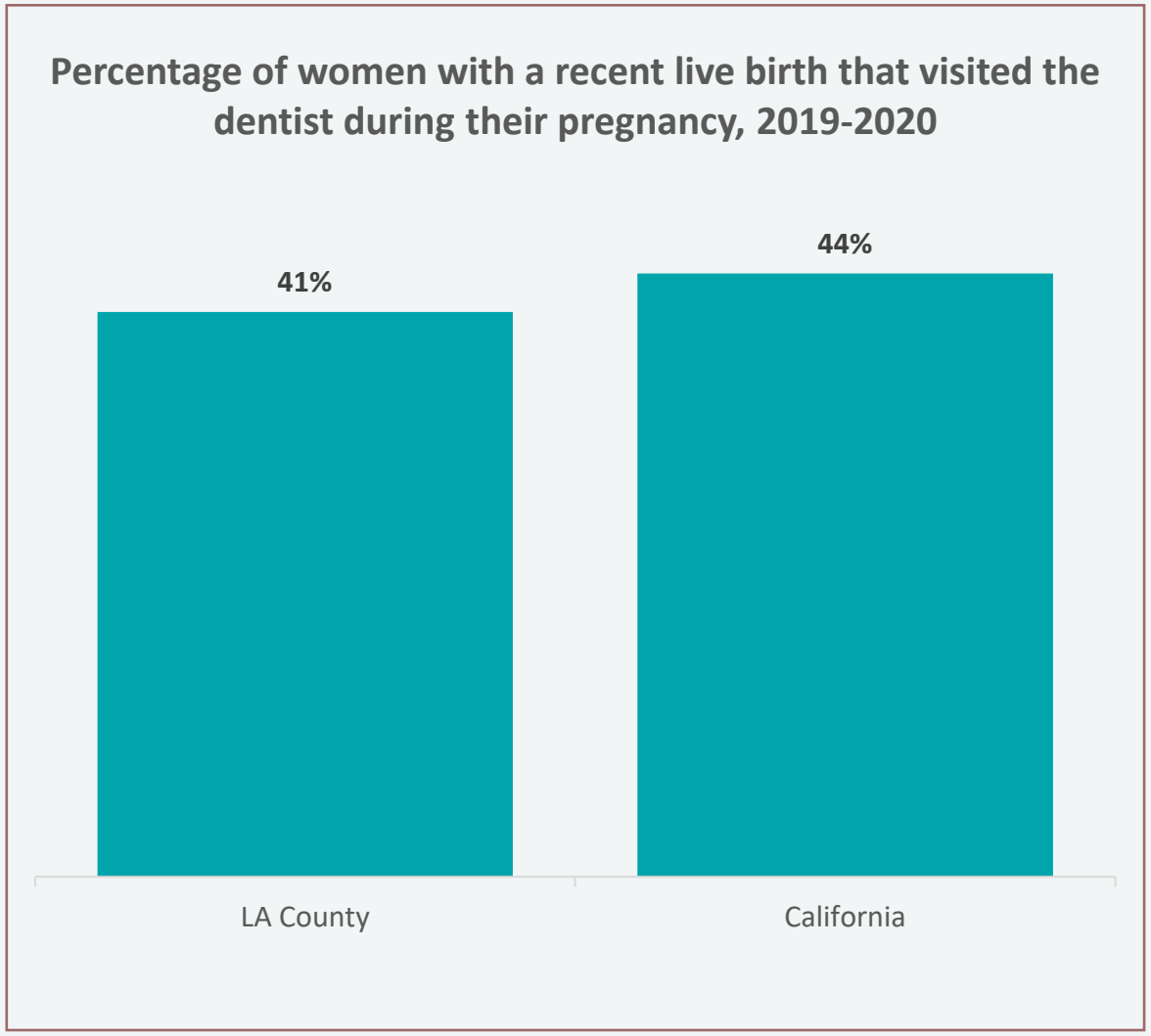
Dental Visit in Past Year Among Adults with Diabetes – LA County Trends



- About 2-of-3 LA County adults with diabetes report having a dental visit in the past year

- Data Source: California Health Interview Survey, 2013-2020, https://ask.chis.ucla.edu/

Dental Visit Among Pregnant Women - Prevalence

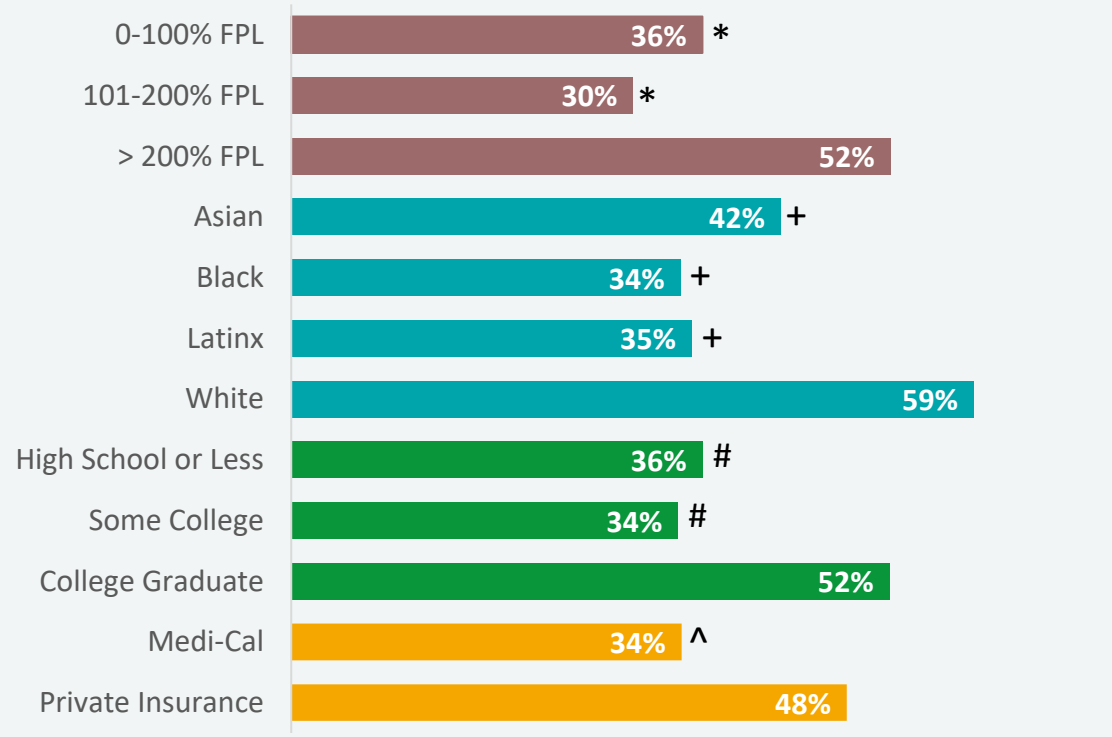


- The percentage of women with a dental visit during pregnancy is lower in LA County when compared to California
  - NOTE: Data for the US is not available

- Data Source: California Maternal and Infant Health Assessment, 2019-2020. Analysis obtained from California Department of Public Health, Office of Oral Health.

Dental Visit Among Pregnant Women – LA County Disparities

Percentage of pregnant women in LA County with a dental visit by income, race/ethnicity, education, and insurance, 2019-2020



*Significantly lower prevalence than > 200% FPL
+Significantly lower prevalence than White women
#Significantly lower prevalence than college graduates
^Significantly lower prevalence than women with private insurance

FPL=Federal poverty level

Lower income women are significantly less likely to have a dental visit during pregnancy compared to higher income women

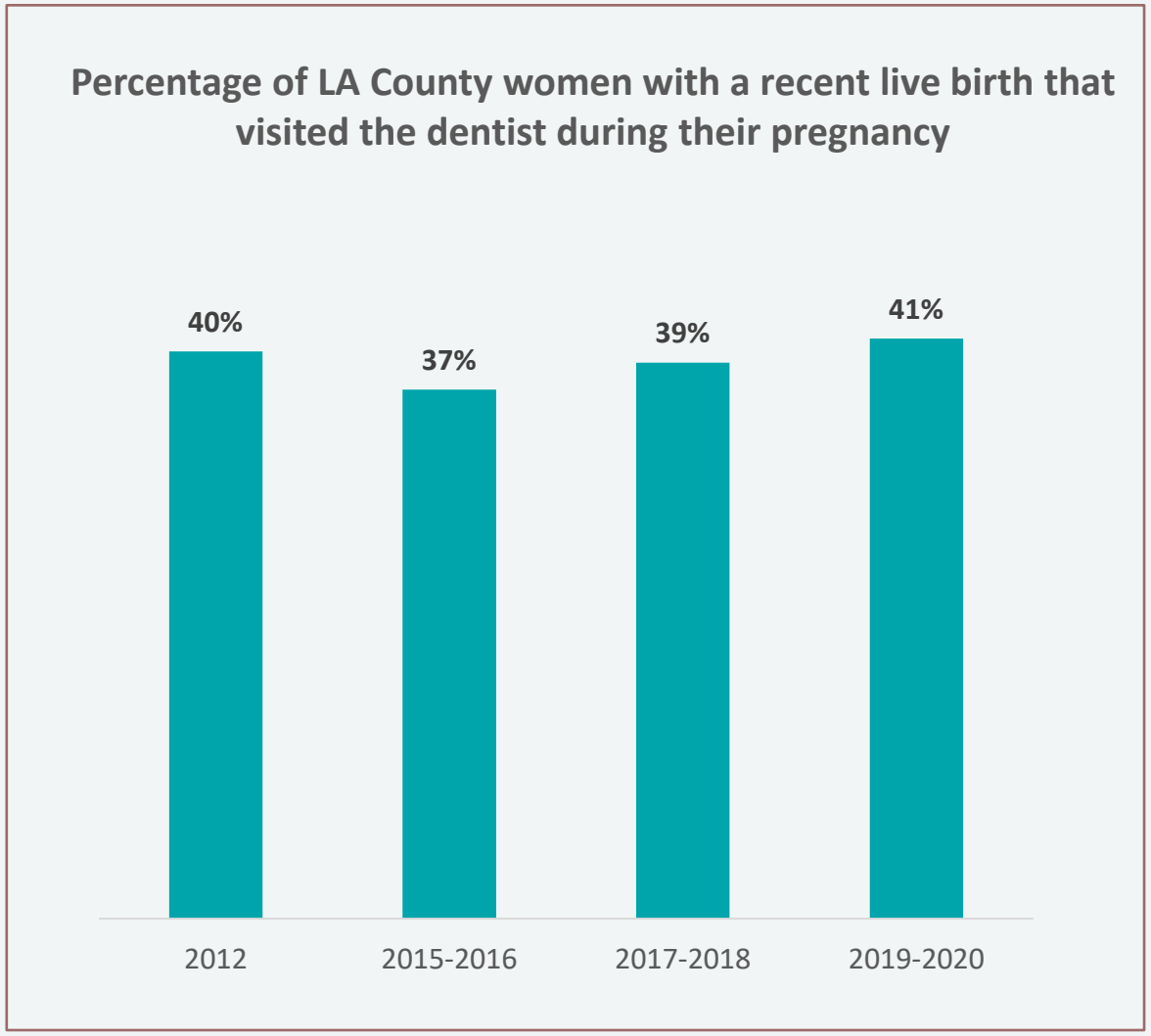
Black/African American, Latina/Latinx, and Asian American women are significantly less likely to have a dental visit during pregnancy compared to Whites

Women with less than a college degree are significantly less likely to have a dental visit during pregnancy compared to women with a college degree

Women with Medi-Cal are significantly less likely to have a dental visit during pregnancy compared to those with private insurance

- Data Source: California Maternal and Infant Health Assessment, 2019-2020. Analysis obtained from California Department of Public Health, Office of Oral Health.

Dental Visit Among Pregnant Women – LA County Trends



- The percentage of LA County women with a dental visit during their pregnancy has not changed since 2012

- Data Source: California Maternal and Infant Health Assessment. Analysis obtained from California Department of Public Health, Office of Oral Health.

Dental Visit Among Pregnant Women – Barriers to Care

Reasons why LA County women with a recent live birth did not visit a dentist during pregnancy, 2019

53% Didn't need to go

39% Too busy

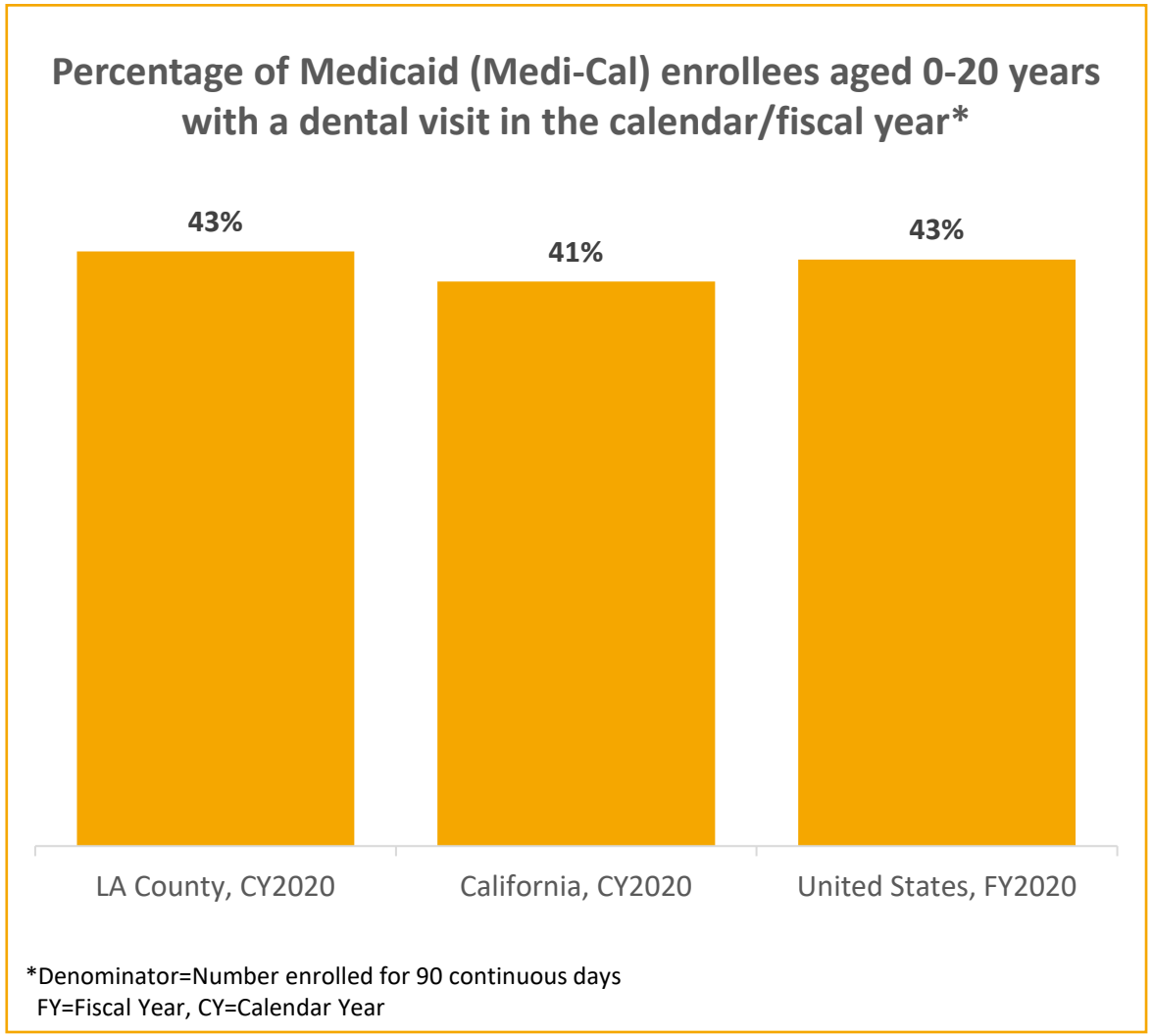
53% Did not think it was safe to go to dentist during pregnancy

30% Cost

30% No dental insurance

- Data Source: California Maternal and Infant Health Assessment, 2019. Analysis obtained from California Department of Public Health, Office of Oral Health.
- NOTE: Women could select multiple reasons, therefore, the total exceeds 100%

Dental Visit in Year Among Medicaid Children - Prevalence

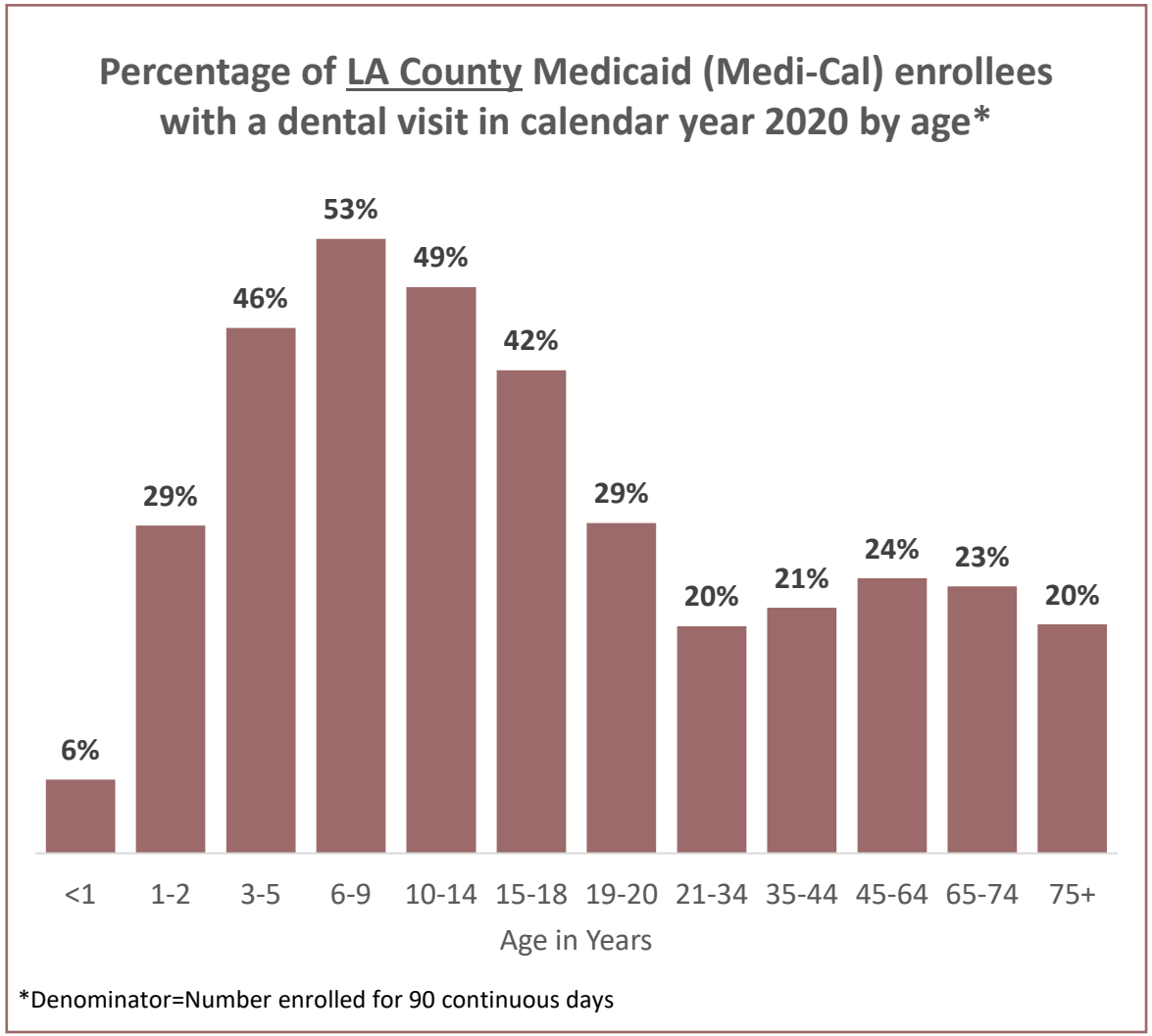


- The percentage of children aged 0-20 years enrolled in Medicaid with a dental visit in the calendar/fiscal year is similar for LA County, California, and the US

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal children with a dental visit in CY2020 was substantially lower than in CY2019

- Data Sources: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/; California Health and Human Services, Dental Utilization Measures and Sealant Data by Age Group Calendar Year 2013 to 2019, https://data.chhs.ca.gov/dataset/test-dhcs-dental-utilization-measures-and-sealant-data-by-age-groups-calendar-year-2013-to-2015; Centers for Medicare and Medicaid Services, EPSDT/CMS-416, FY2020, https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html

Dental Visit in Year Among Medicaid Enrollees - Prevalence

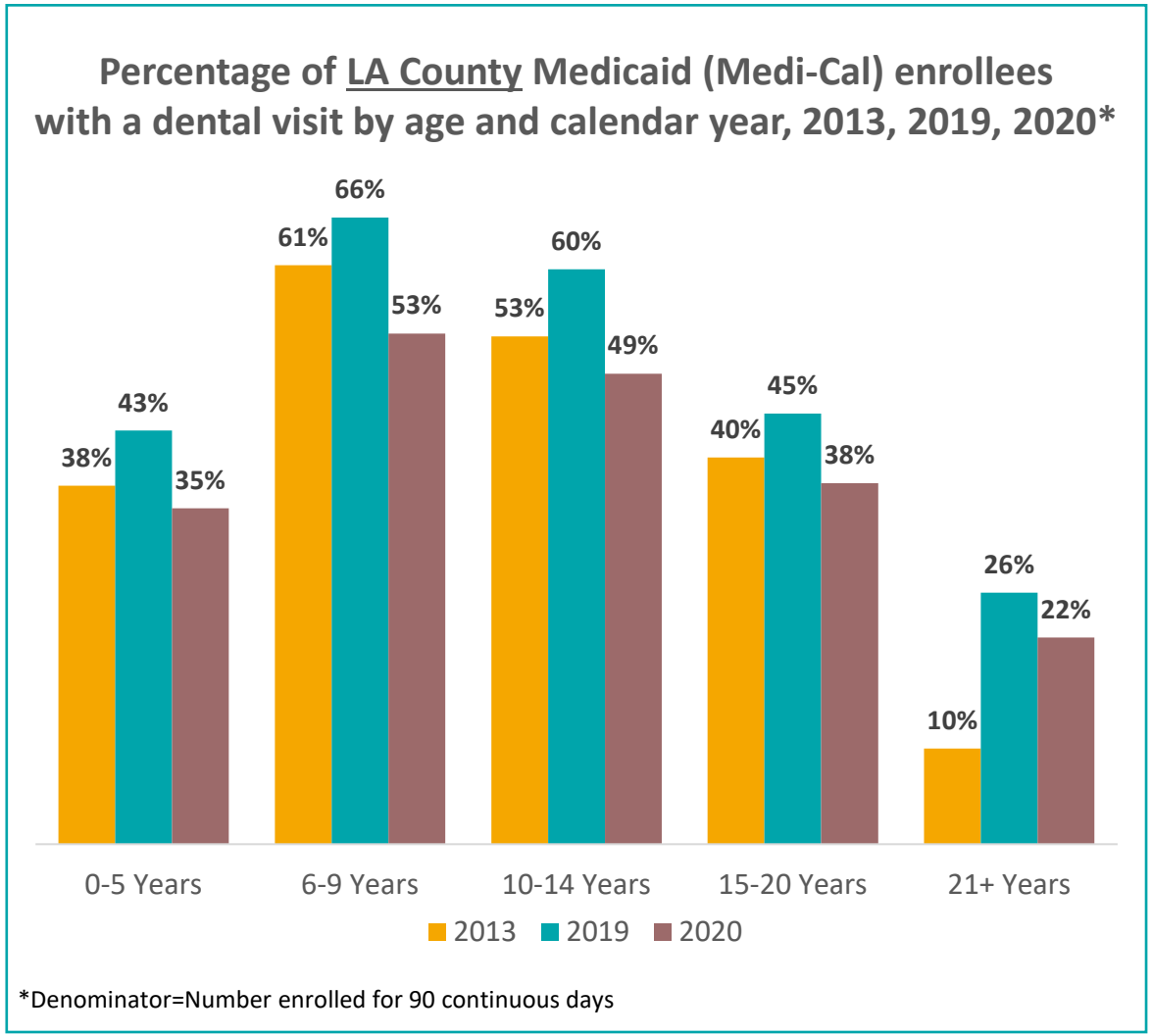


- The percentage of Medi-Cal enrollees with a dental visit is highest among children 6-9 years of age
- For Medi-Cal adults, fewer than 3 out of 10 had a dental visit in 2020

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal enrollees with a dental visit in CY2020 was substantially lower than in CY2019

- Data Source: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/

Dental Visit Among Medicaid Enrollees – LA County Trends

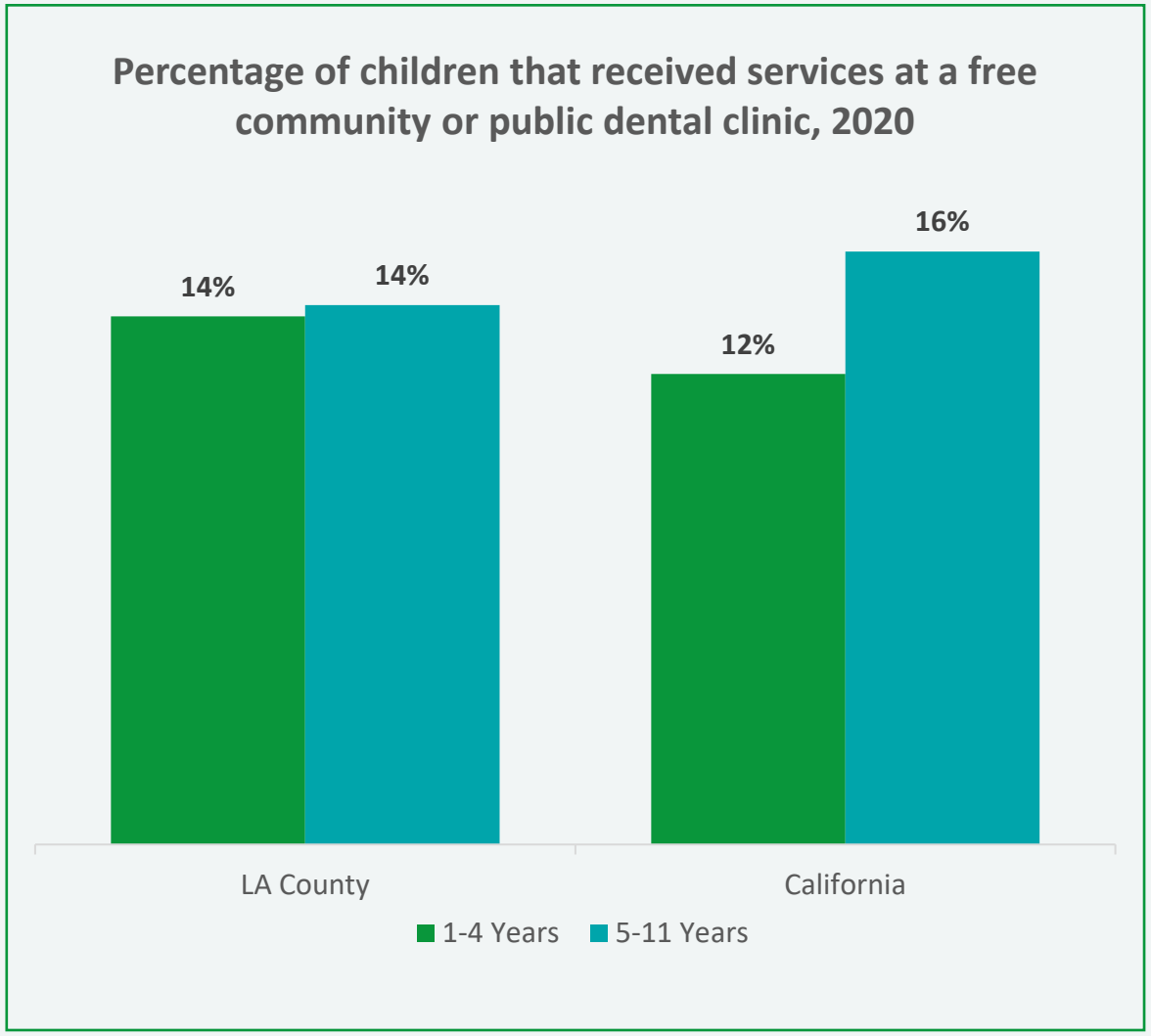


- From 2013-2019, the percentage of Medi-Cal enrollees with a dental visit increased for all age groups but decreased in 2020

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal enrollees with a dental visit in CY2020 was substantially lower than in CY2019

- Data Source: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/

Use of Free/Public Clinics Among Children – Overall Prevalence

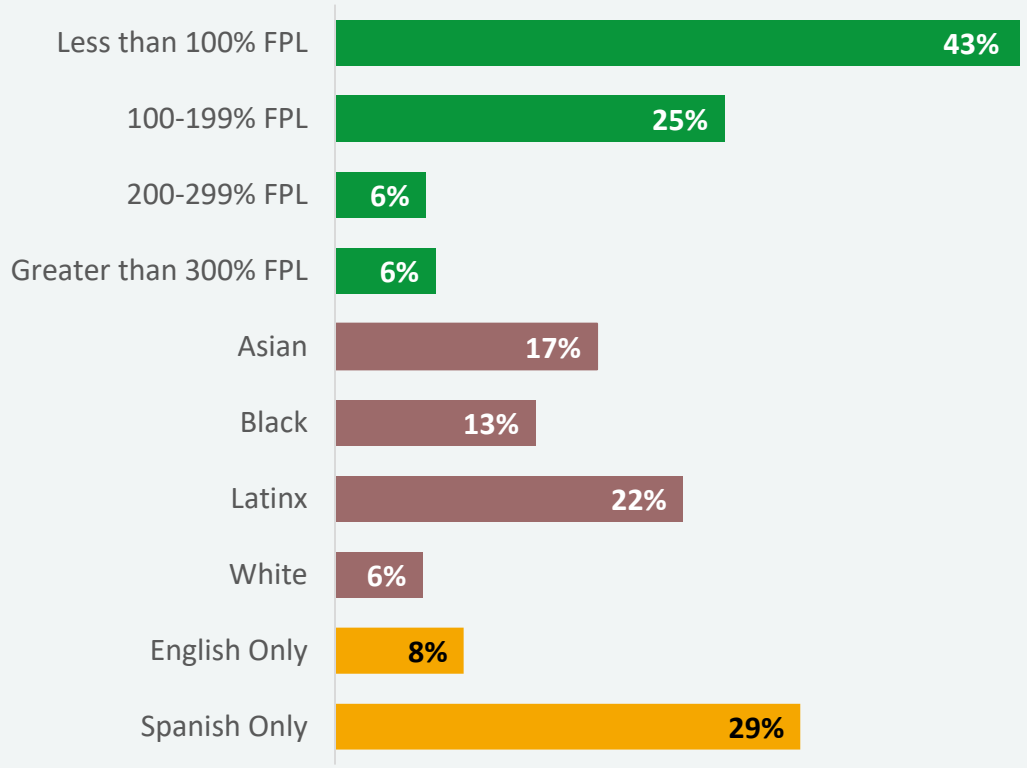


- The percentage of children that received dental care at a free community or public dental clinic is similar for LA County and California
- Data for the US is not available

- Data Sources: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/
- CHIS question: Asked of children older than two or younger children with teeth

Use of Free/Public Clinics Among Children – California[1] Disparities

Percentage of California[1] children 1-11 years that used a free or public dental clinic by selected characteristics, 2020



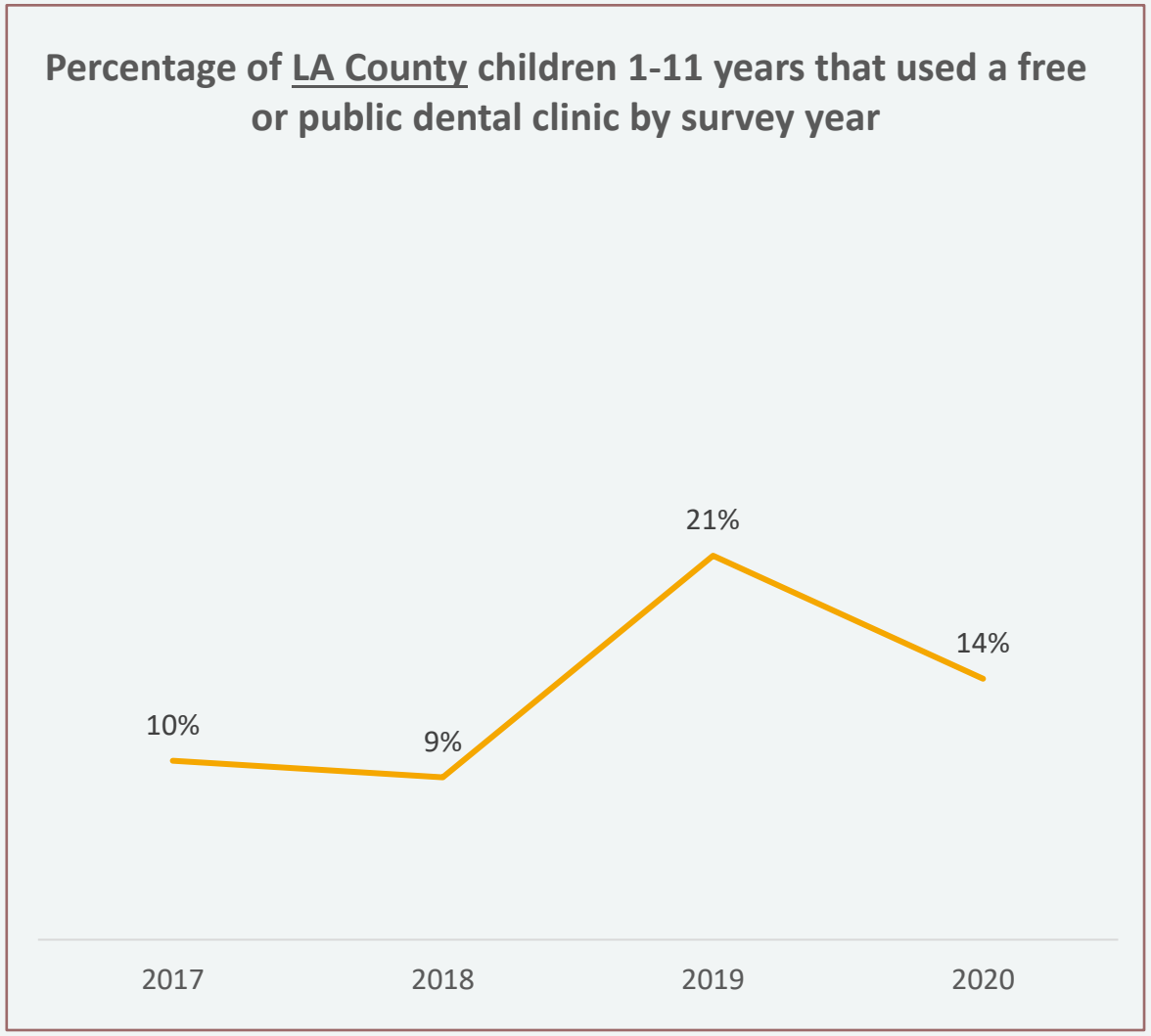
FPL = Federal poverty level

- Lower income children are significantly more likely to use free/public dental clinics compared to their higher income peers
- Latinx children are more likely to use free/public dental clinics compared to White children
- Children from households where Spanish is the primary language are more likely to use free/public dental clinics compared to children from English speaking households

- Data Sources: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/
- CHIS question: Asked of children older than two or younger children with teeth

[1] Because of small sample sizes, LA County data is not available

Use of Free/Public Clinics Among Children – LA County Trends



- The percentage of children that used a free community or public dental clinic doubled between 2017 and 2019 then fell in 2020

- Data Source: California Health Interview Survey (CHIS), 2017-2020, https://ask.chis.ucla.edu/
- CHIS question: Asked of children older than two or younger children with teeth

Missed School Because of Dental Problems

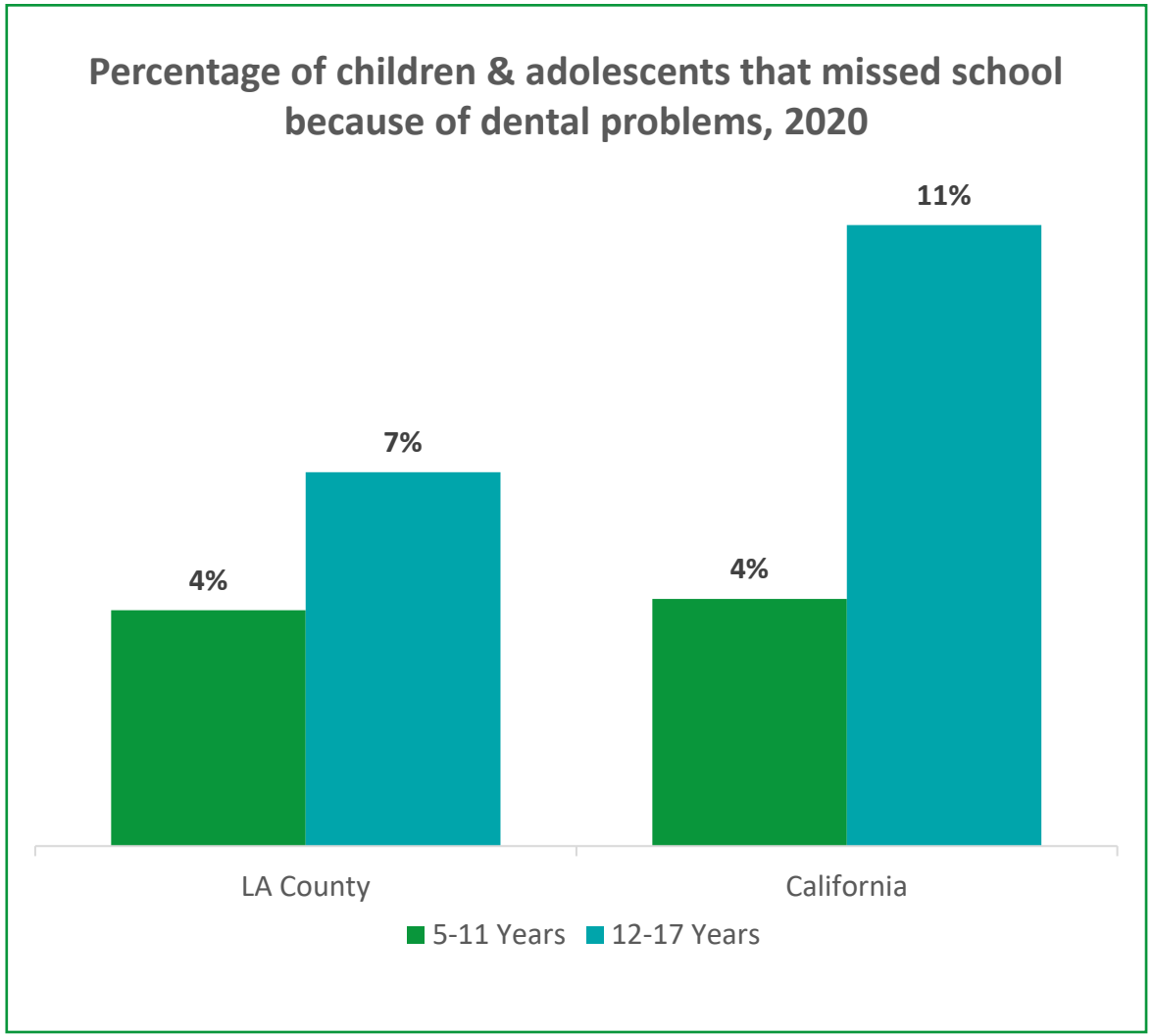
Children 5-11 Years
Adolescents 12-17 Years

Missed School Days Because of Dental Problems*
DATA-AT-A-GLANCE

Indicator/Population Group	LA County	California	United States
Missed school because of dental problems*	Percentage (Year)	Percentage (Year)	Percentage (Year)
Children 5-11 years	4% (2020)	4% (2020)	Not Available
Adolescents 12-17 years	7% (2020)	11% (2020)	Not Available

* Does not include dental visits for cleanings or check-ups

Missed School Because of Dental Problems – Overall Prevalence



- The percentage of adolescents aged 12-17 that missed school because of dental problems is lower in LA County compared to California
- Data for the US is not available
- Information on disparities and LA County trends is not presented because estimates are statistically unstable
- **IMPORTANT NOTE:** ***Parents*** reported missed school days for children 5-11 while ***adolescents*** reported their own missed school days

- Data Sources: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/
- CHIS question: Asked of children & adolescents aged 5 years and older who attend school

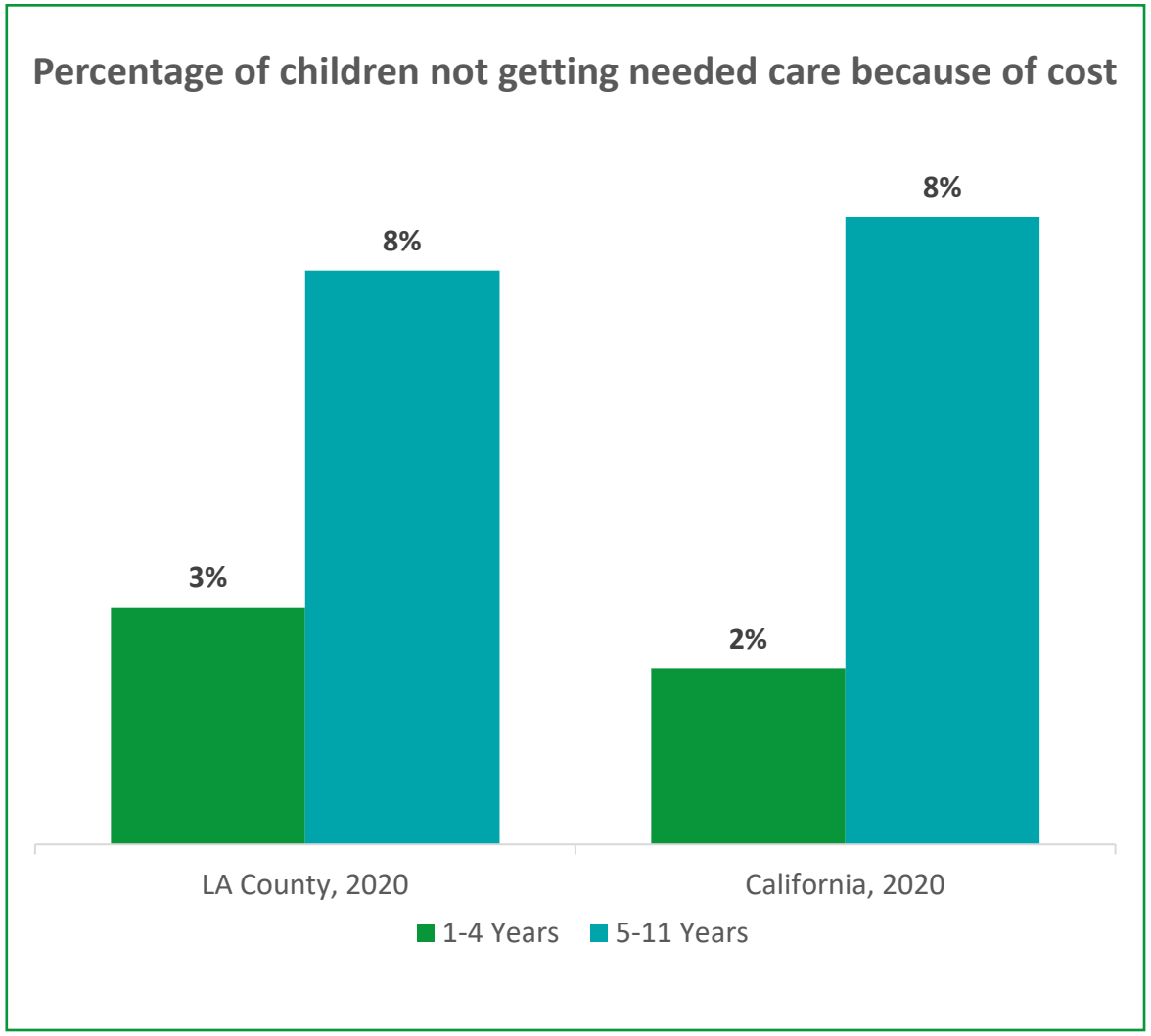
Problems Accessing Dental Care

Children 1-11 Years

Problems Accessing Dental Care
DATA-AT-A-GLANCE

Indicator/Population Group	LA County	California	United States
Could not afford needed dental care	Percentage (Year)	Percentage (Year)	Percentage (Year)
Children 1-4 years	3% (2020)	2% (2020)	Not Available
Children 5-11 years	8% (2020)	8% (2020)	Not Available

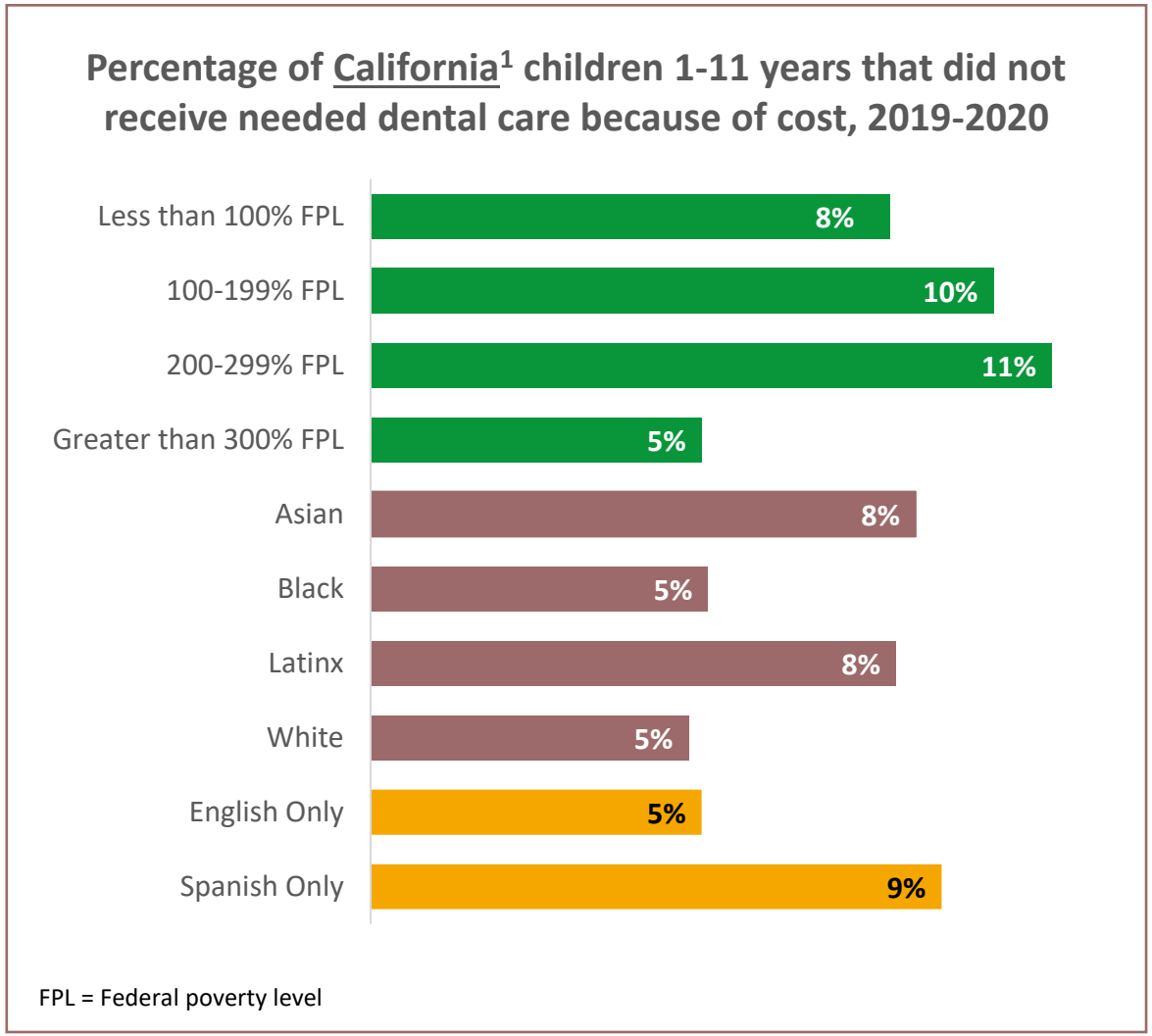
Could Not Afford Needed Dental Care – Overall Prevalence



- The California Health Interview Survey (CHIS) asked parents if there was a time when their child needed dental care but did not get it because they could not afford it
- The percentage of parents reporting problems accessing dental care because of cost is similar for LA County and California
- Data for the US is not available

- Data Sources: California Health Interview Survey (CHIS), 2020, https://ask.chis.ucla.edu/
- CHIS question: asked of children older than 2 or younger than 2 with teeth

Could Not Afford Dental Care – California[1] Disparities



Children from lower-income families are more likely to report problems accessing dental care compared to children from families with an income > 300% FPL

Asian and Latinx children are more likely to have problems accessing dental care because of cost compared to White children

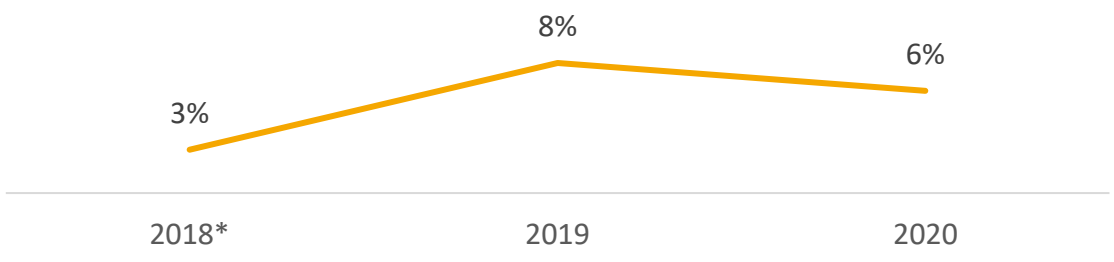
Children from Spanish speaking households are almost twice as likely to have problems accessing dental care compared to children from English speaking homes

- Data Sources: California Health Interview Survey (CHIS), 2019-2020 pooled, https://ask.chis.ucla.edu/
- CHIS question: asked of children older than 2 or younger than 2 with teeth

[1] Because of small sample sizes, LA County data is not available

Could Not Afford Dental Care – LA County Trends

Percentage of LA County children 1-11 years that did not receive needed dental care because of cost by survey year



* Estimates for 2018 are statistically unstable

- This question was not asked prior to 2018
- Estimates for 2018 are statistically unstable

- Data Source: California Health Interview Survey (CHIS), 2018-2020, https://ask.chis.ucla.edu/
- CHIS question: Asked of children older than two or younger children with teeth

Dental Insurance Coverage

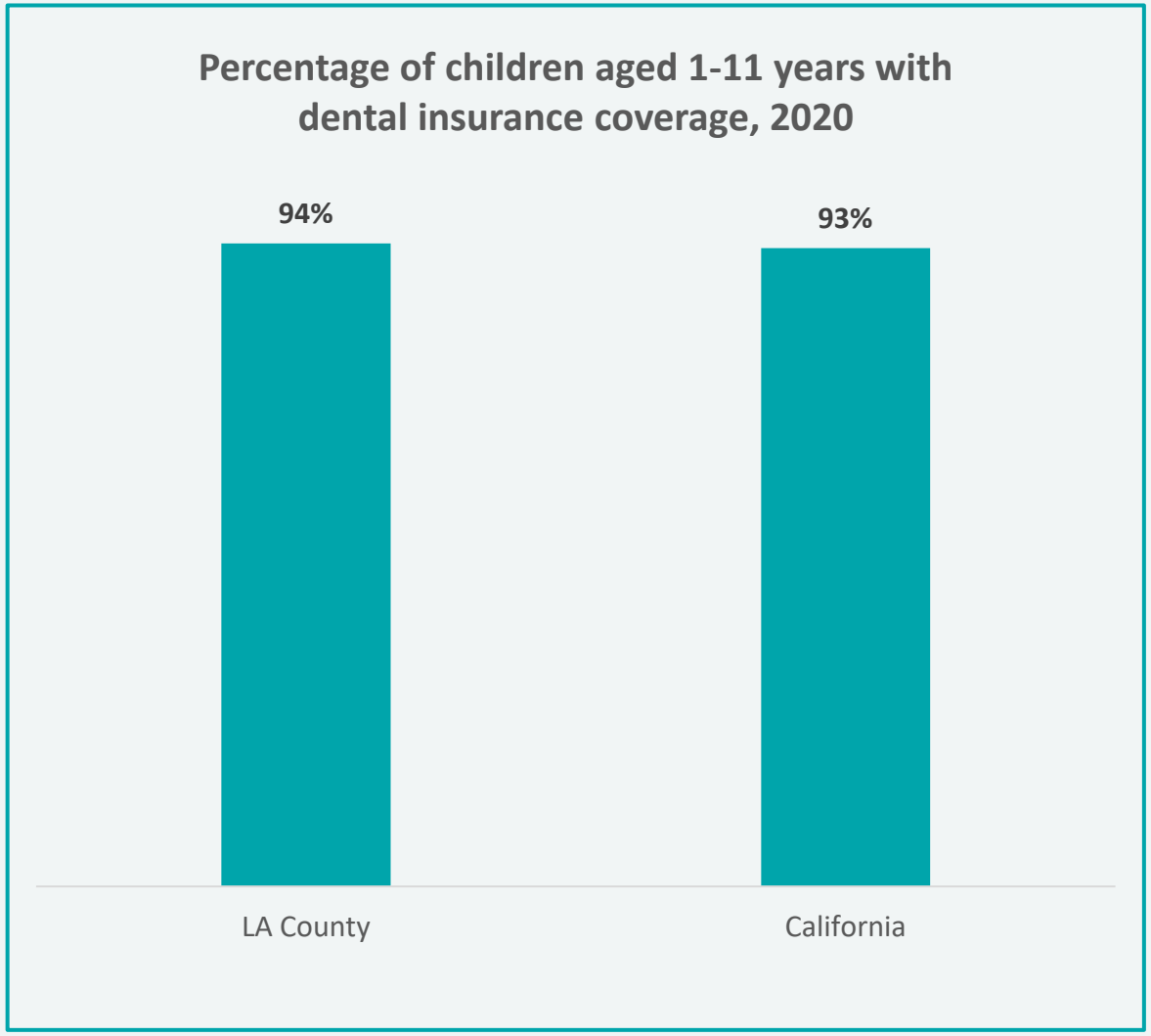
Children 1-11 Years
Adults 18+ Years

DENTAL INSURANCE COVERAGE
DATA-AT-A-GLANCE

Age/Indicator	LA County 2013	LA County 2020	California 2020	United States
1-11 Years				
Has dental insurance coverage	88%	94%	93%	Not Available
Parents pays for any/all dental insurance*	Not Available	47%	50%	Not Available
18+ Years				
Has dental insurance coverage	52%	67%	70%	Not Available

* Limited to children with dental insurance

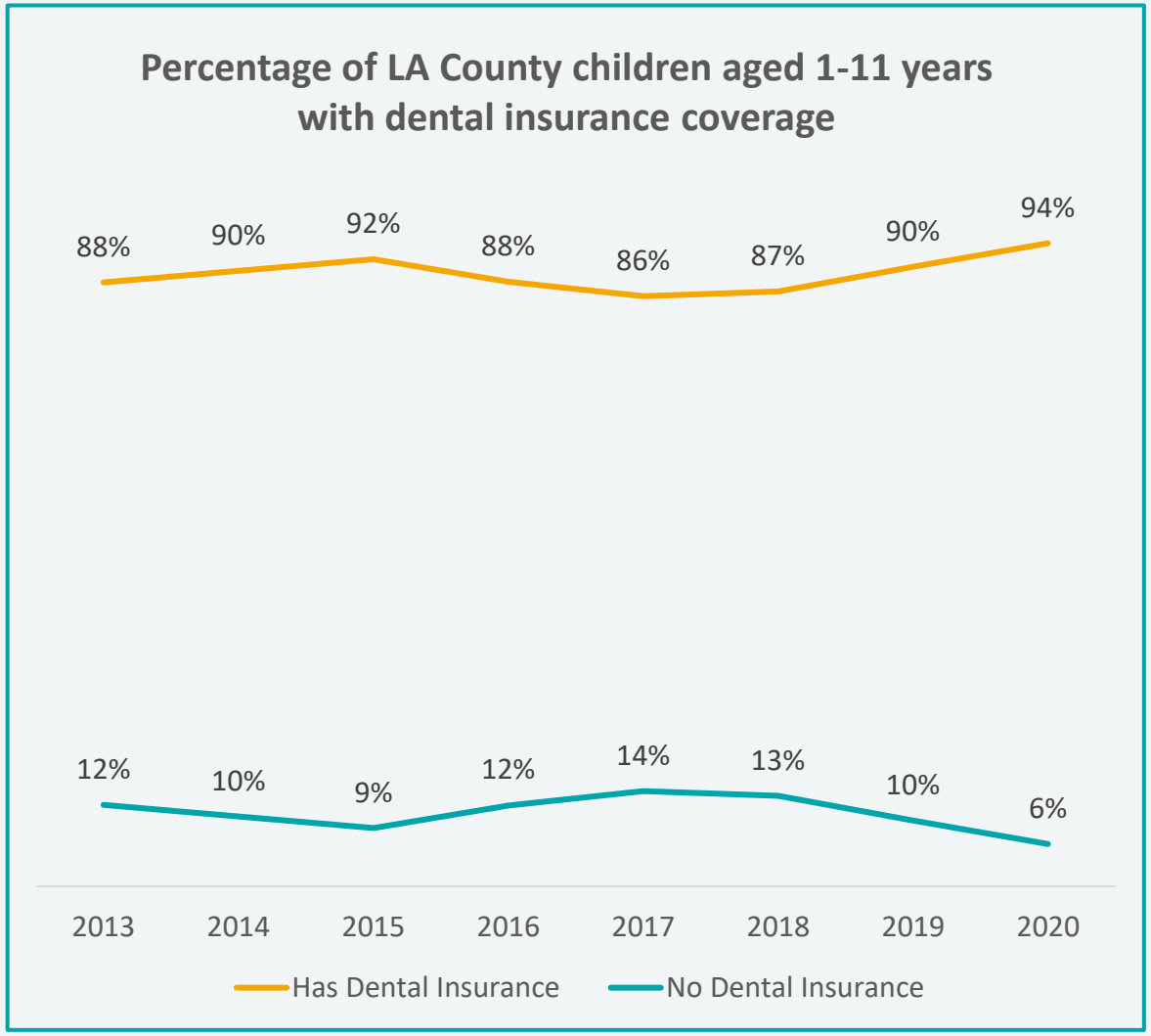
Dental Insurance Among Children 1-11 Years – Overall Prevalence



- Almost all children in California and LA County have dental insurance
  - Comparable data for the United States is not available
- In LA County, there are no disparities in terms of dental insurance coverage
  - The percentage of children with dental insurance coverage does not vary by socioeconomic status, race/ethnicity, or language spoken at home

- Data Source: California Health Interview Survey, 2020, https://ask.chis.ucla.edu/
- CHIS question: asked of all children 3-11 years of age and children under 3 years of age with teeth

Dental Insurance Among Children 1-11 Years – LA County Trends



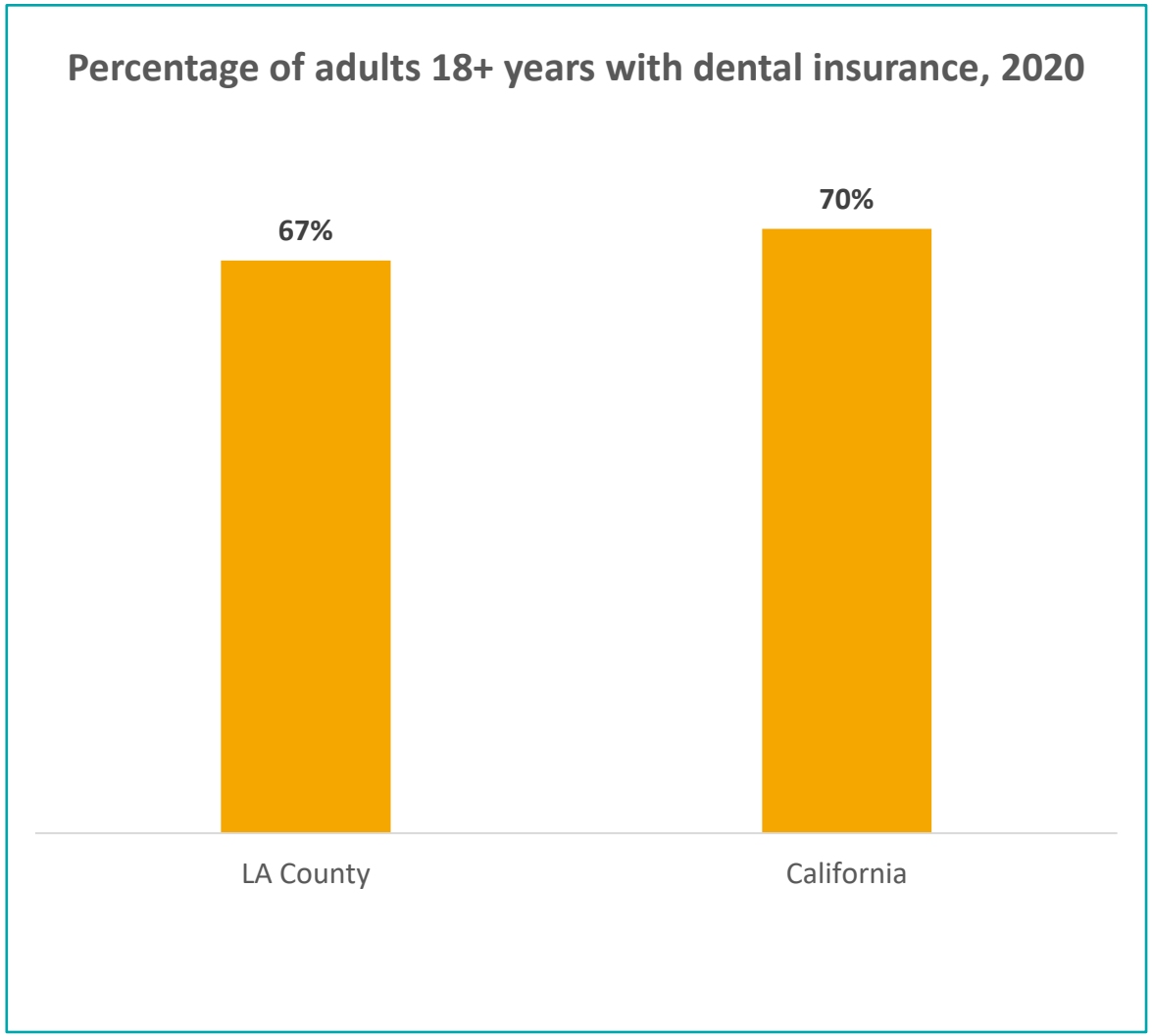
- Since 2013, the percentage of LA County children with dental insurance coverage has remained stable

47%

The percentage of parents that report paying any or all of the premium or cost for their child's dental insurance

- Data Source: California Health Interview Survey (CHIS), 2013-2020, https://ask.chis.ucla.edu/
- CHIS question: asked of all children 3-11 years of age and children under 3 years of age with teeth

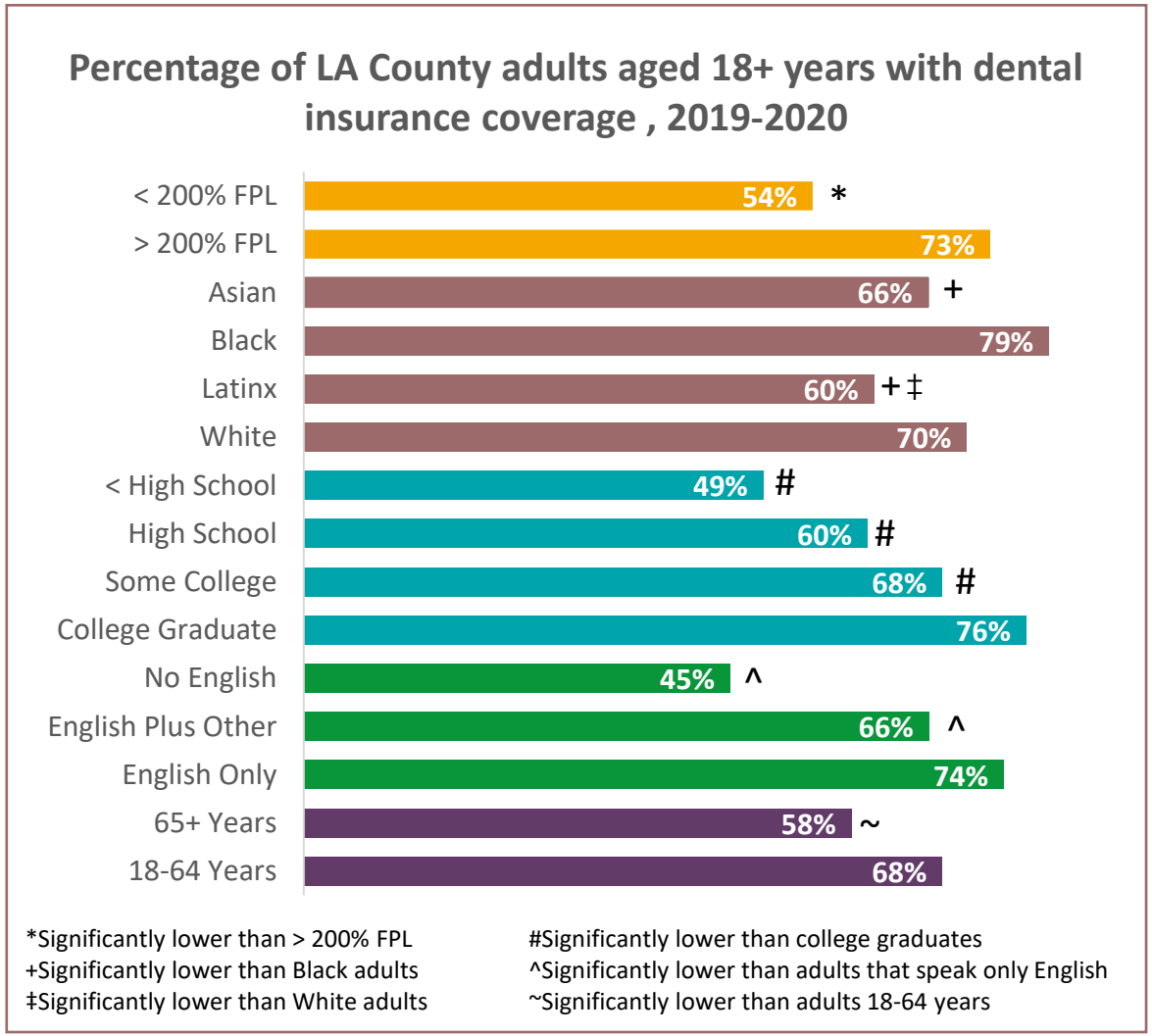
Dental Insurance Among Adults 18+ Years – Overall Prevalence



- About 2-of-3 adults in California and LA County have dental insurance
- Comparable data for the United States is not available

- Data Source: California Health Interview Survey, 2020, https://ask.chis.ucla.edu/

Dental Insurance Among Adults 18+ Years – LA County Disparities



Lower income adults are significantly less likely to have dental insurance compared to higher income adults

Latinx adults are significantly less likely to have dental insurance compared to Black/African American and White adults

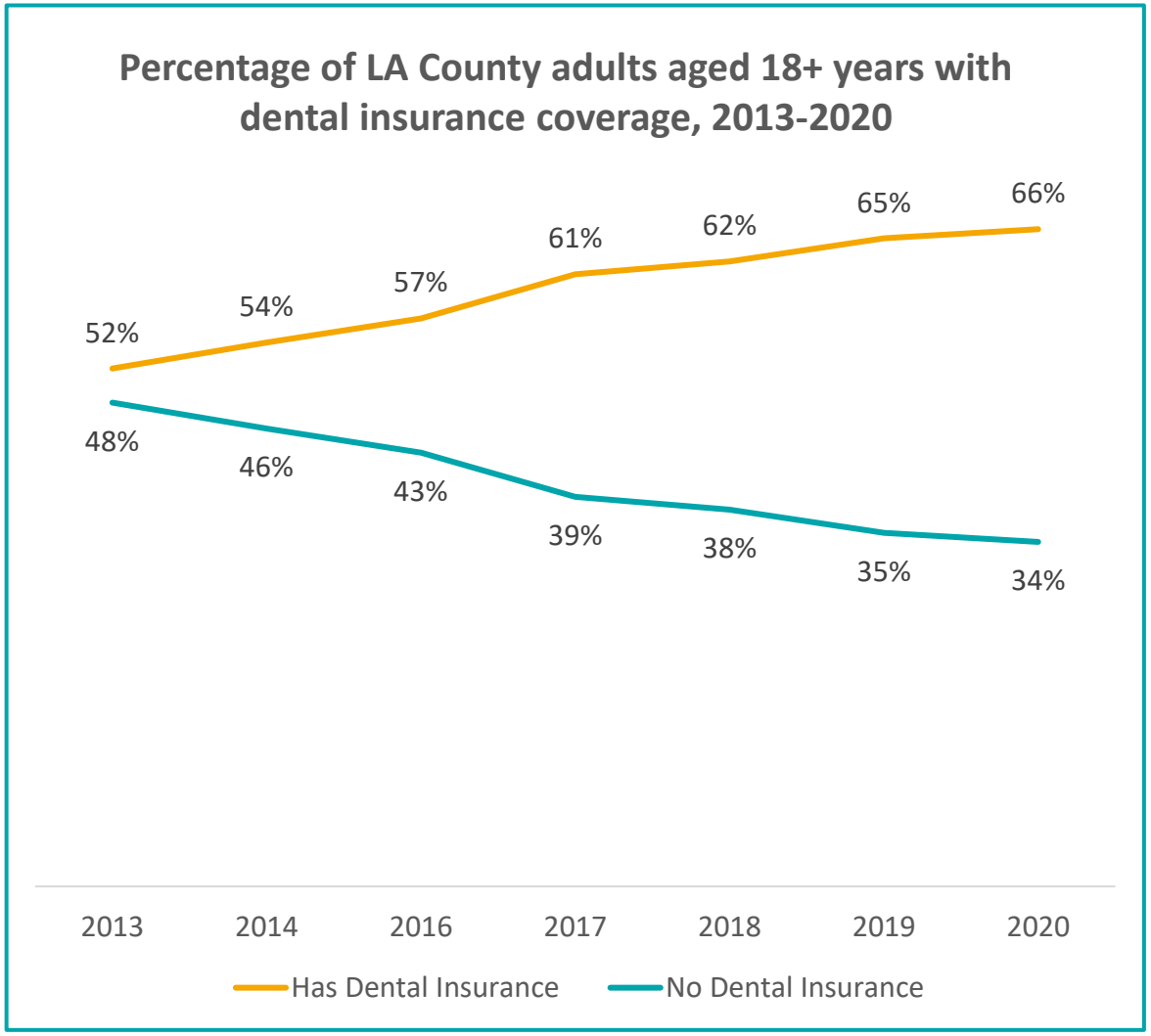
Adults with less than a college degree are significantly less likely to have dental insurance compared to adults with a college degree

Adults that speak non-English languages at home are significantly less likely to have dental insurance compared to adults that speak only English

Older adults are significantly less likely to have dental insurance compared to younger adults aged 18-64 years

- Data Source: California Health Interview Survey, 2019-2020 pooled, https://ask.chis.ucla.edu/

Dental Insurance Among Adults 18+ Years – LA County Trends



- Since 2013, the percentage of LA County adults with dental insurance has steadily increased

- Data Source: California Health Interview Survey, https://ask.chis.ucla.edu/

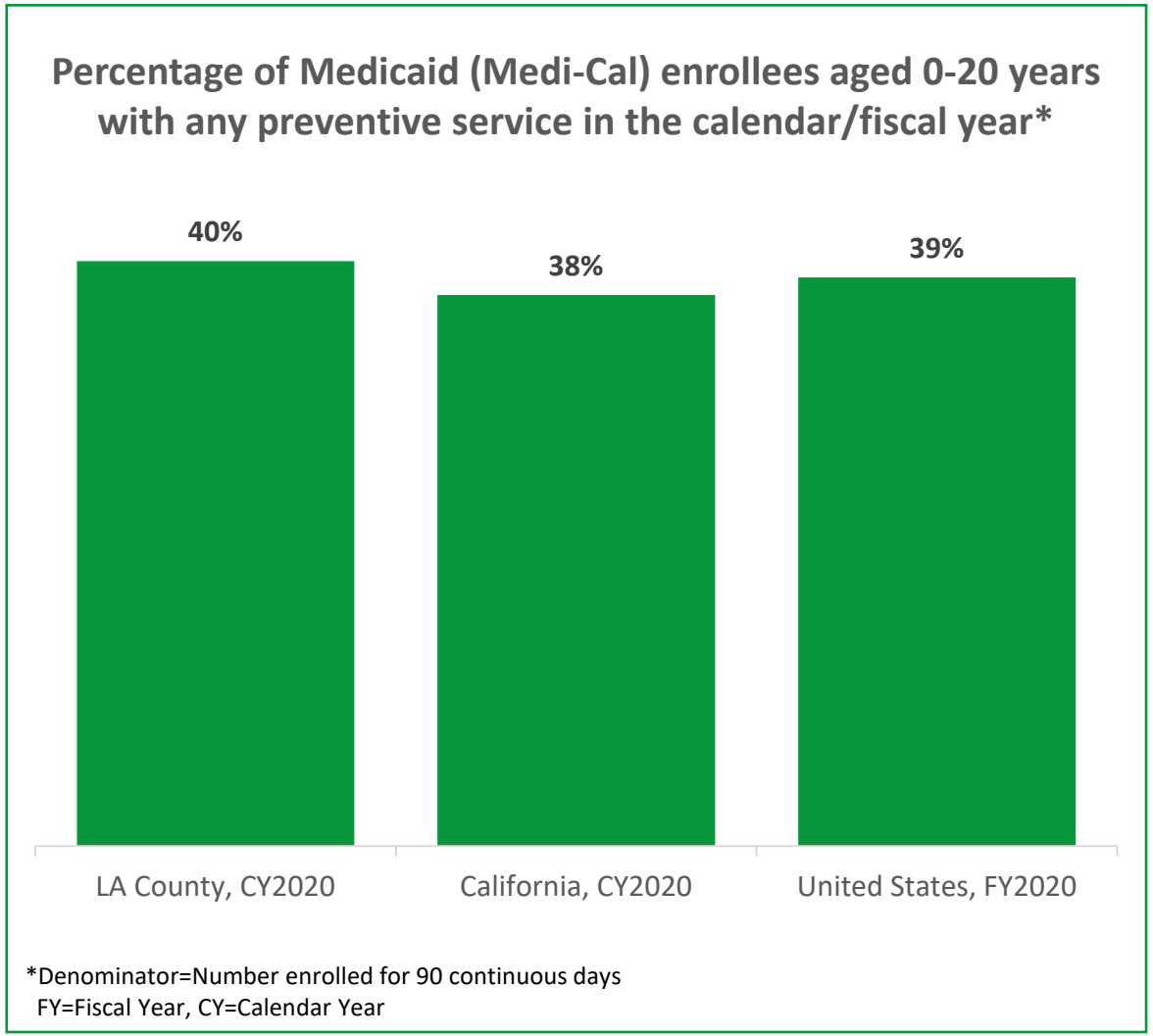
Preventive Services Among Medicaid Enrollees

Any Preventive Service
Dental Sealants

PREVENTIVE SERVICES AMONG MEDICAID ENROLLEES
DATA-AT-A-GLANCE

Indicator/Age	LA County 2013	LA County CY2019	LA County CY2020	California CY2020	United States FY2020
Any preventive service					
Children 0-20 years	42%	47%	40%	38%	39%
Adults 21+ years	2%	13%	12%	12%	Not Available
Dental sealants permanent molars					
Children 6-9 years	20%	22%	16%	13%	12%
Children 10-14 years	11%	13%	10%	8%	10%

Any Preventive Service Among Medicaid Children - Prevalence

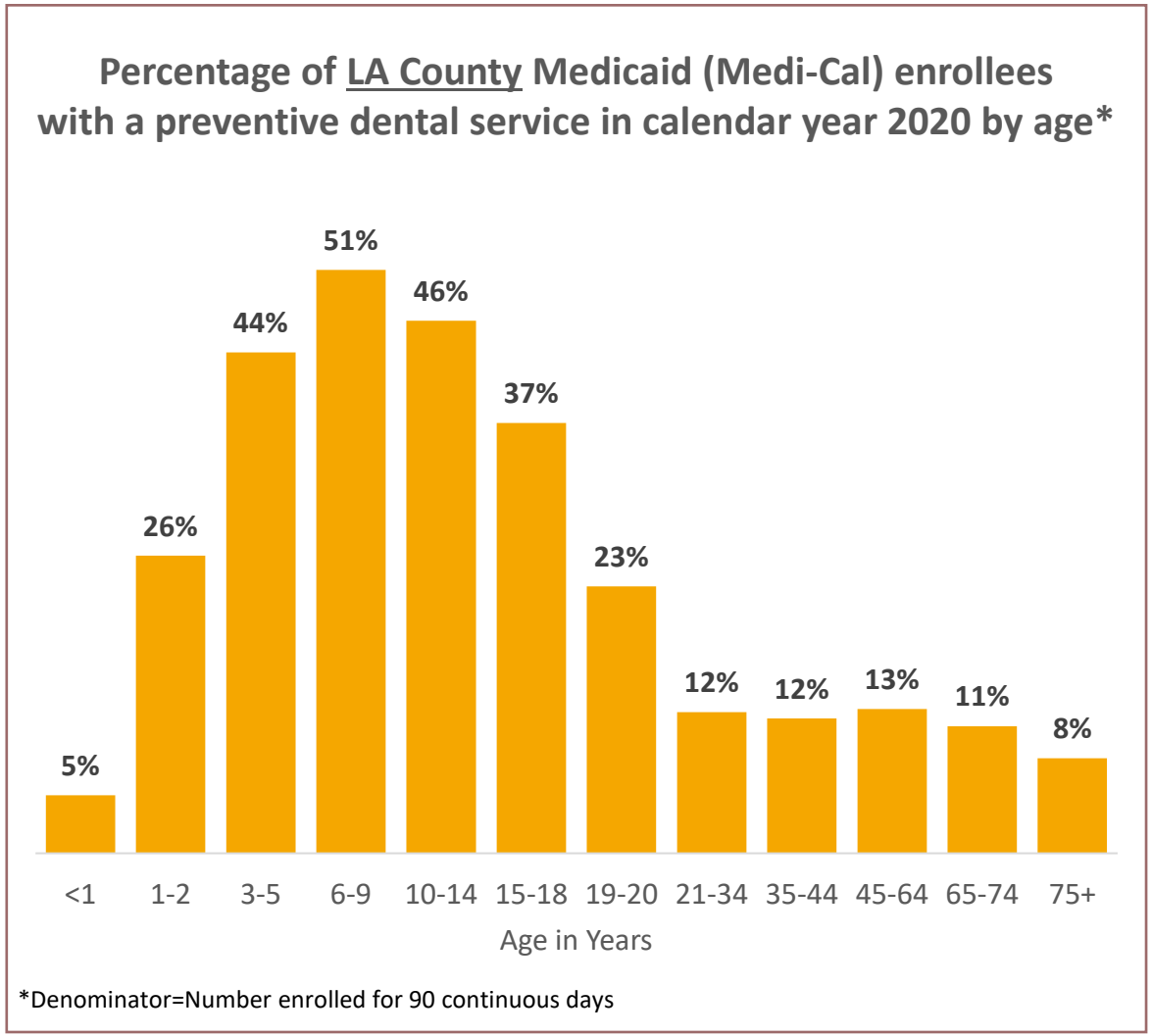


- The percentage of Medicaid enrolled children aged 0-20 years with a preventive dental service in the calendar/fiscal year is similar for LA County, California, and the US

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal enrollees with a preventive service in CY2020 was substantially lower than in CY2019

- Data Sources: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/; Centers for Medicare and Medicaid Services, EPSDT/CMS-416, FY2020, https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html

Any Preventive Service Among Medicaid Enrollees - Prevalence

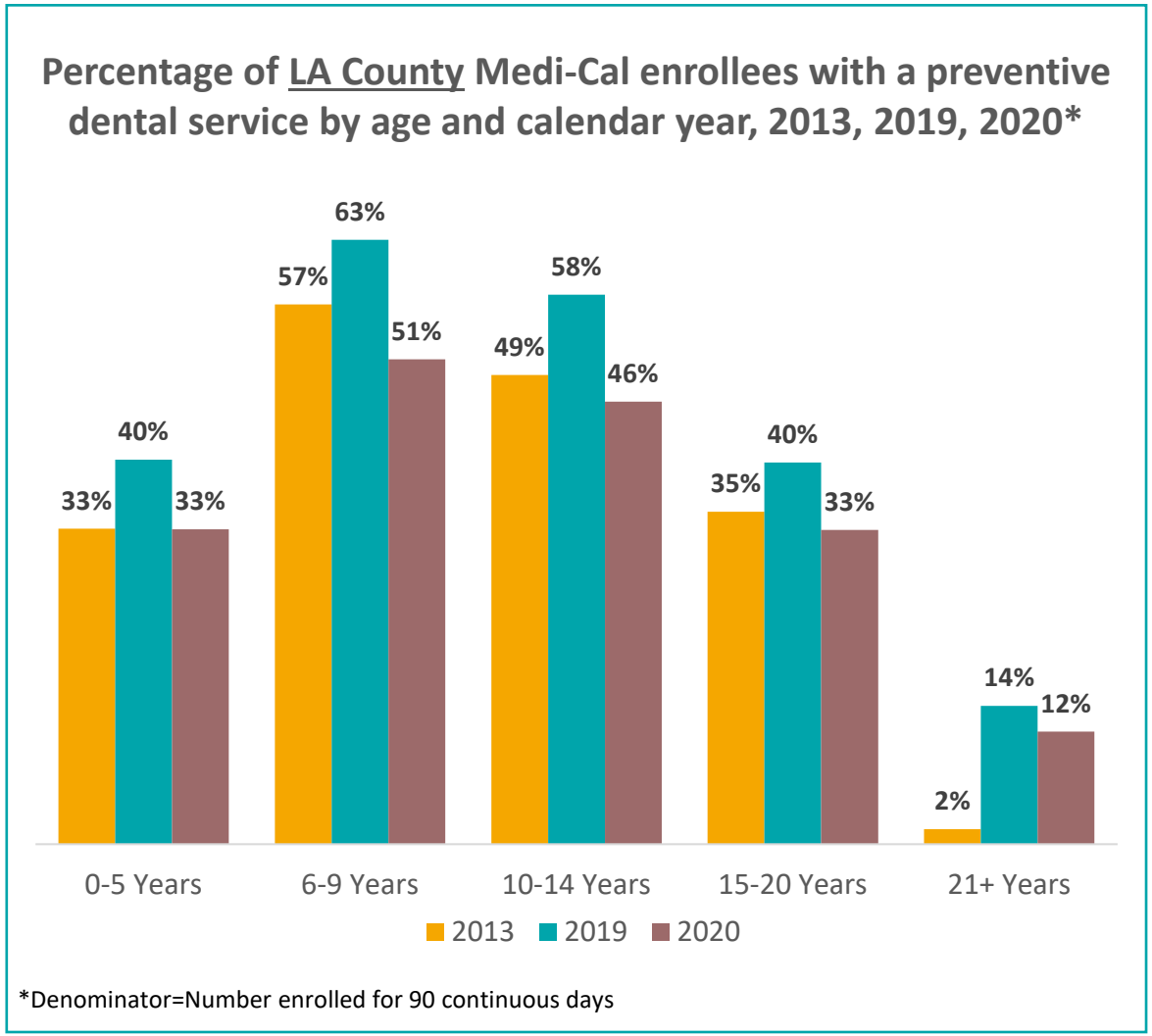


- The percentage of Medi-Cal enrollees with a preventive dental service is highest among children 6-9 years of age
- For Medi-Cal adults, fewer than 1 out of 8 had a preventive dental service in 2020

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal enrollees with a preventive service in CY2020 was substantially lower than in CY2019

- Data Source: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/

Any Preventive Service Among Medicaid Enrollees – LA County Trends

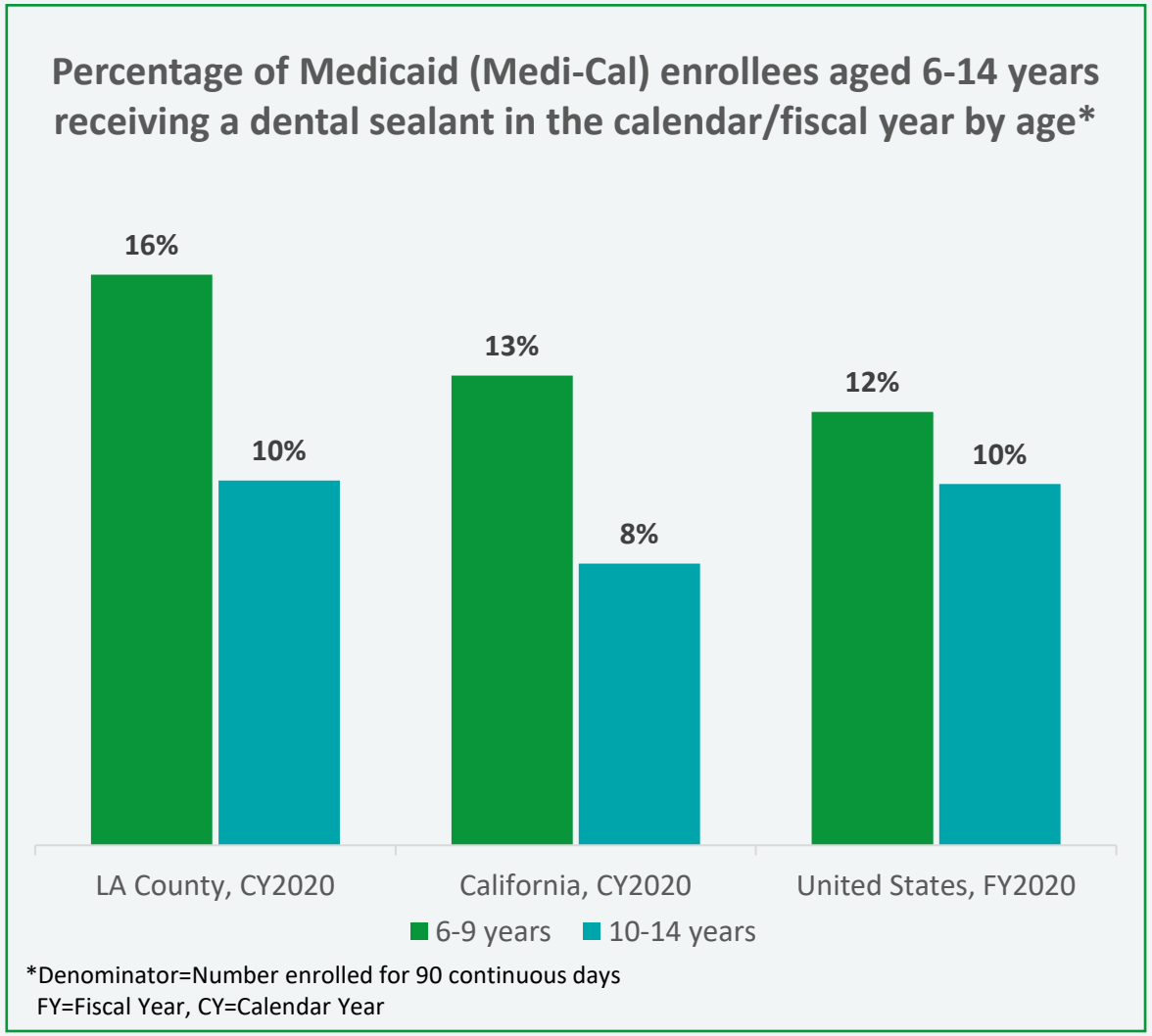


- Between 2013 and 2019, the percentage of Medi-Cal enrollees with a preventive dental service increased for all age groups but declined in CY2020

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal enrollees with a preventive service in CY2020 was substantially lower than in CY2019

- Data Source: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/

Dental Sealant Placement Among Medicaid Children - Prevalence

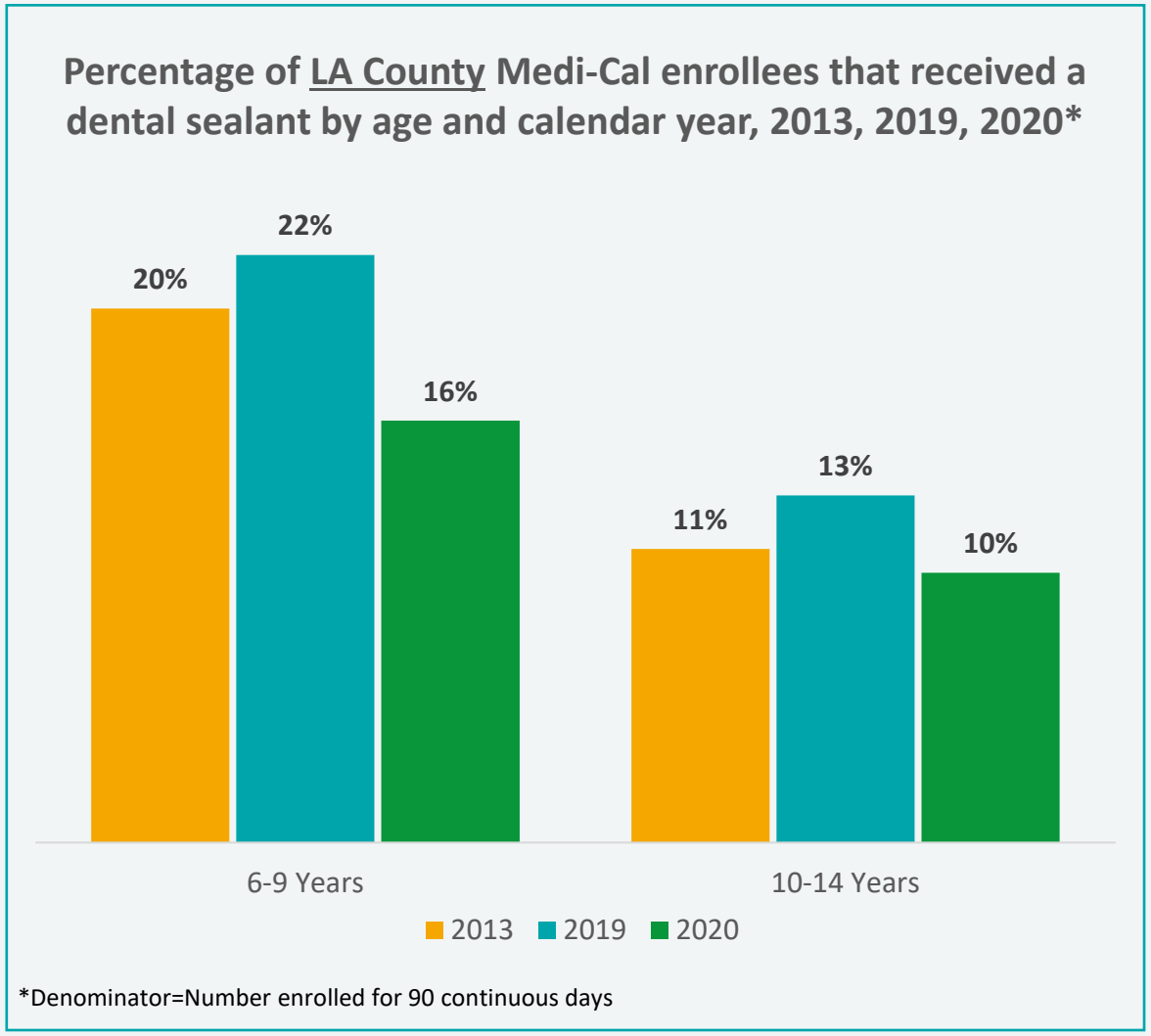


- The percentage of Medicaid enrolled children aged 6-9 years that received a sealant on a permanent molar was higher in LA County when compared to California and the US
- The percentage of Medicaid enrolled children aged 10-14 years that received a sealant on a permanent molar was higher in LA County when compared to California

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal children receiving a dental sealant in CY2020 was substantially lower than in CY2019

- Data Sources: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/; Centers for Medicare and Medicaid Services, EPSDT/CMS-416, FY2020, https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html

Dental Sealants Among Medicaid Enrollees – LA County Trends



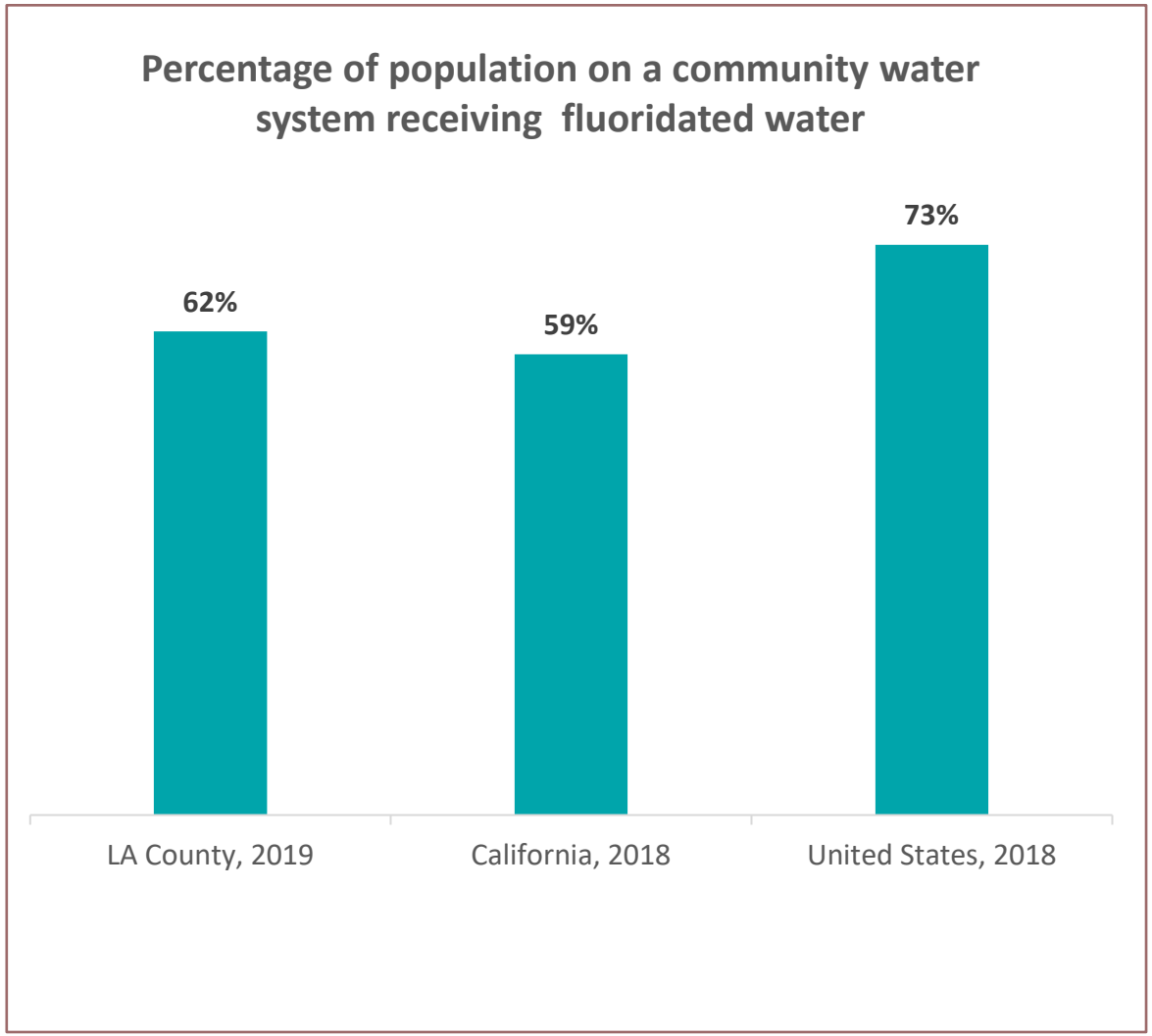
- The percentage of Medi-Cal enrollees aged 6-9 and 10-14 years that received a dental sealant on a permanent molar was similar in 2013 and 2019 but decreased in 2020

Important Note: Because of COVID related dental office closures during CY2020, the percentage of Medi-Cal children receiving a dental sealant in CY2020 was substantially lower than in CY2019

- Data Source: California Health and Human Services, Dental Utilization Measures and Sealant Data by County and Age Calendar Year 2013 to 2020, https://data.chhs.ca.gov/dataset/test-dhcs-utilization-measures-and-sealant-data-by-county-calendar-year-2013-to-2015/

Community Water Fluoridation

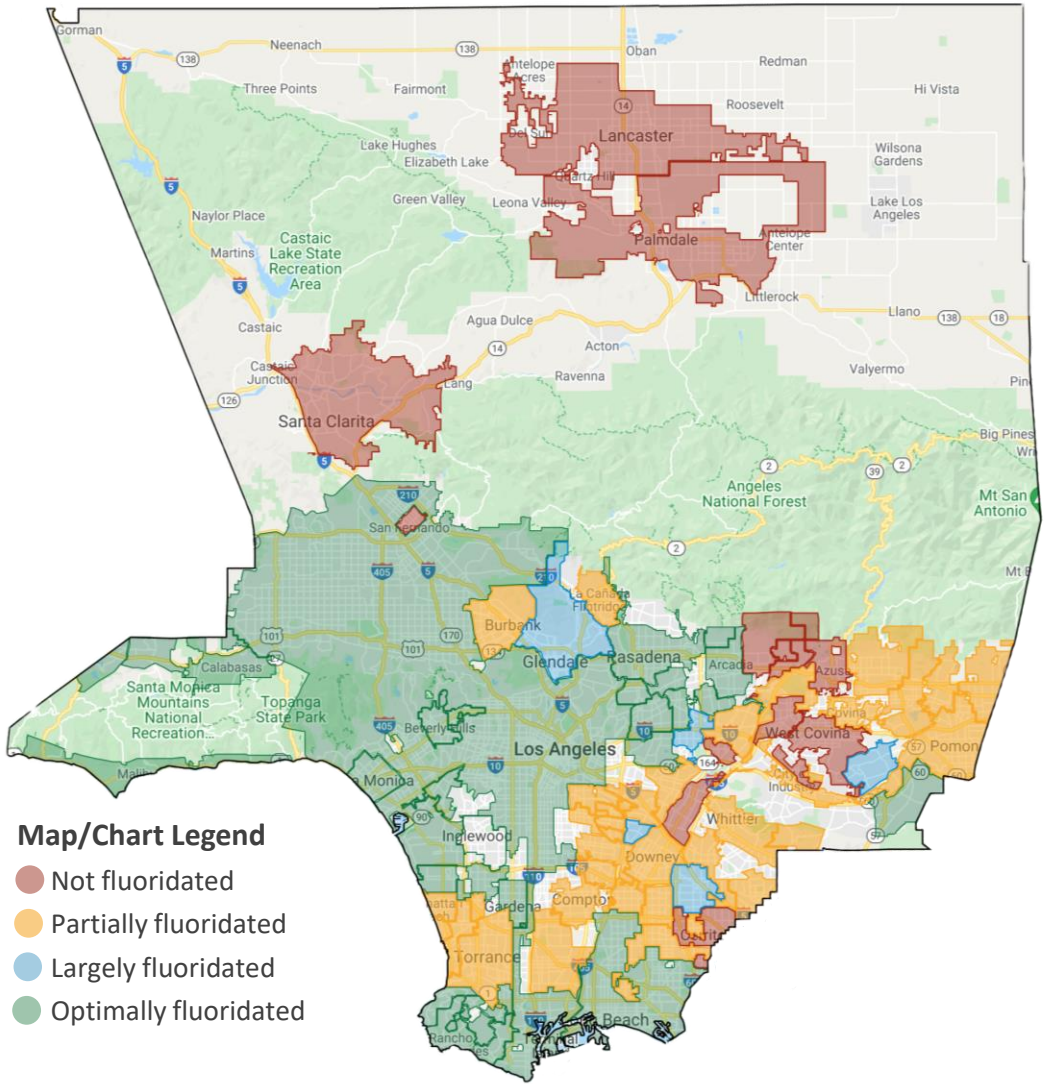
Community Water Fluoridation



- The percentage of the population receiving fluoridated water is lower in LA County when compared to the national average

- Data Sources: CDC, 2018 Fluoridation Statistics, https://www.cdc.gov/fluoridation/statistics/2018stats.htm; Los Angeles County Department of Public Health Oral Health Program, Fluoridation Map, 2019

Fluoridation Status of Community Water Systems, 2019

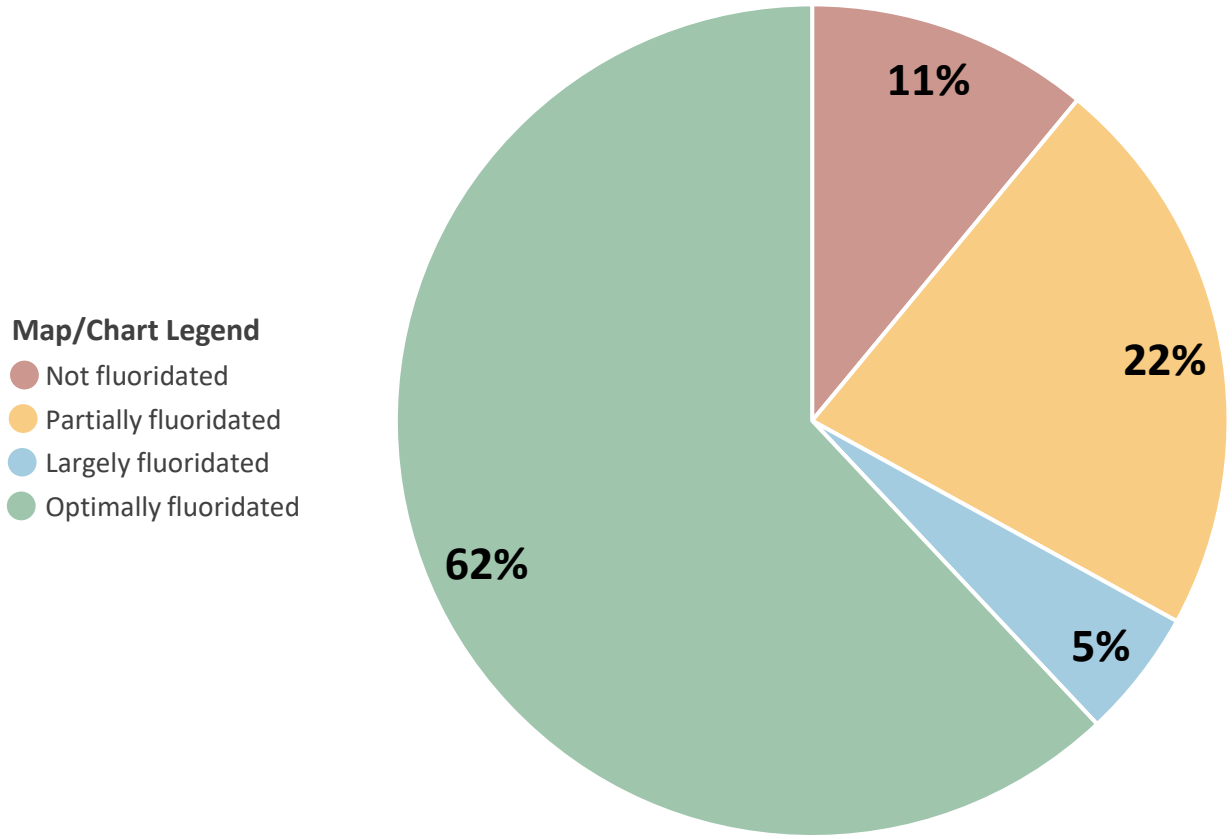


* Areas without a fluoridation color code are not incorporated.

City	Status	City	Status	City	Status
Agoura Hills	Optimally	Hawaiian Gardens	Not	Pasadena	Optimally
Alhambra	Optimally	Hawthorne	Optimally	Pico Rivera	Not
Arcadia	Optimally	Hermosa Beach	Partially	Pomona	Partially
Artesia	Partially	Hidden Hills	Optimally	Rancho Palos Verdes	Optimally
Avalon	Not	Huntington Park	Partially	Redondo Beach	Partially
Azusa	Not	Industry	Partially	Rolling Hills	Optimally
Baldwin Park	Not	Inglewood	Optimally	Rolling Hills Estates	Optimally
Bell	Partially	Irwindale	Partially	Rosemead	Largely
Bell Gardens	Largely	La Canada Flintridge	Partially	San Dimas	Partially
Bellflower	Partially	La Habra Heights	Partially	San Fernando	Not
Beverly Hills	Optimally	La Mirada	Partially	San Gabriel	Optimally
Bradbury	Not	La Puente	Not	San Marino	Optimally
Burbank	Partially	La Verne	Partially	Santa Clarita	Not
Calabasas	Optimally	Lakewood	Partially	Santa Fe Springs	Partially
Carson	Partially	Lancaster	Not	Santa Monica	Optimally
Cerritos	Not	Lawndale	Partially	Sierra Madre	Optimally
Claremont	Partially	Lomita	Optimally	Signal Hill	Partially
Commerce	Partially	Long Beach	Optimally	South El Monte	Not
Compton	Partially	Los Angeles	Optimally	South Gate	Partially
Covina	Partially	Lynwood	Partially	South Pasadena	Optimally
Cudahy	Partially	Malibu	Optimally	Temple City	Optimally
Culver City	Optimally	Manhattan Beach	Partially	Torrance	Partially
Diamond Bar	Optimally	Maywood	Partially	Vernon	Partially
Downey	Partially	Monrovia	Not	Walnut	Largely
Duarte	Not	Montebello	Partially	West Covina	Not
El Monte	Partially	Monterey Park	Optimally	West Hollywood	Optimally
El Segundo	Optimally	Norwalk	Largely	Westlake Village	Optimally
Gardena	Optimally	Palmdale	Not	Whittier	Partially
Glendale	Largely	Palos Verdes Estates	Optimally		
Glendora	Partially	Paramount	Partially		

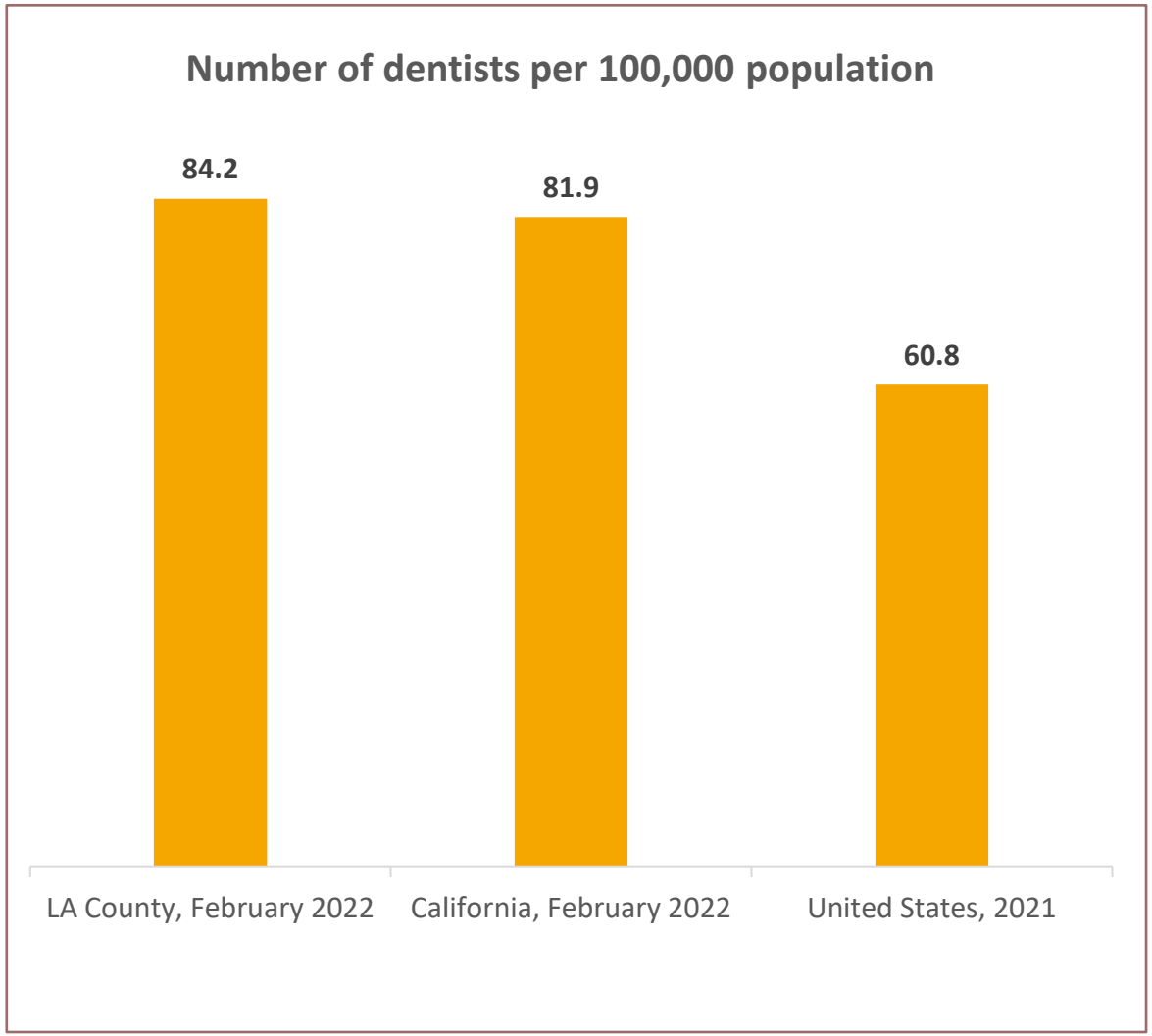
- Data Source: Los Angeles County Department of Public Health Oral Health Program, Fluoridation Map, 2019, http://publichealth.lacounty.gov/ohp/docs/Water%20Fluoridation%202019%20with%20Key.pdf

Percentage of LA County Population in Incorporated Cities Receiving Fluoridated Water (88 cities), 2019



Dental Workforce

Number of Dentists

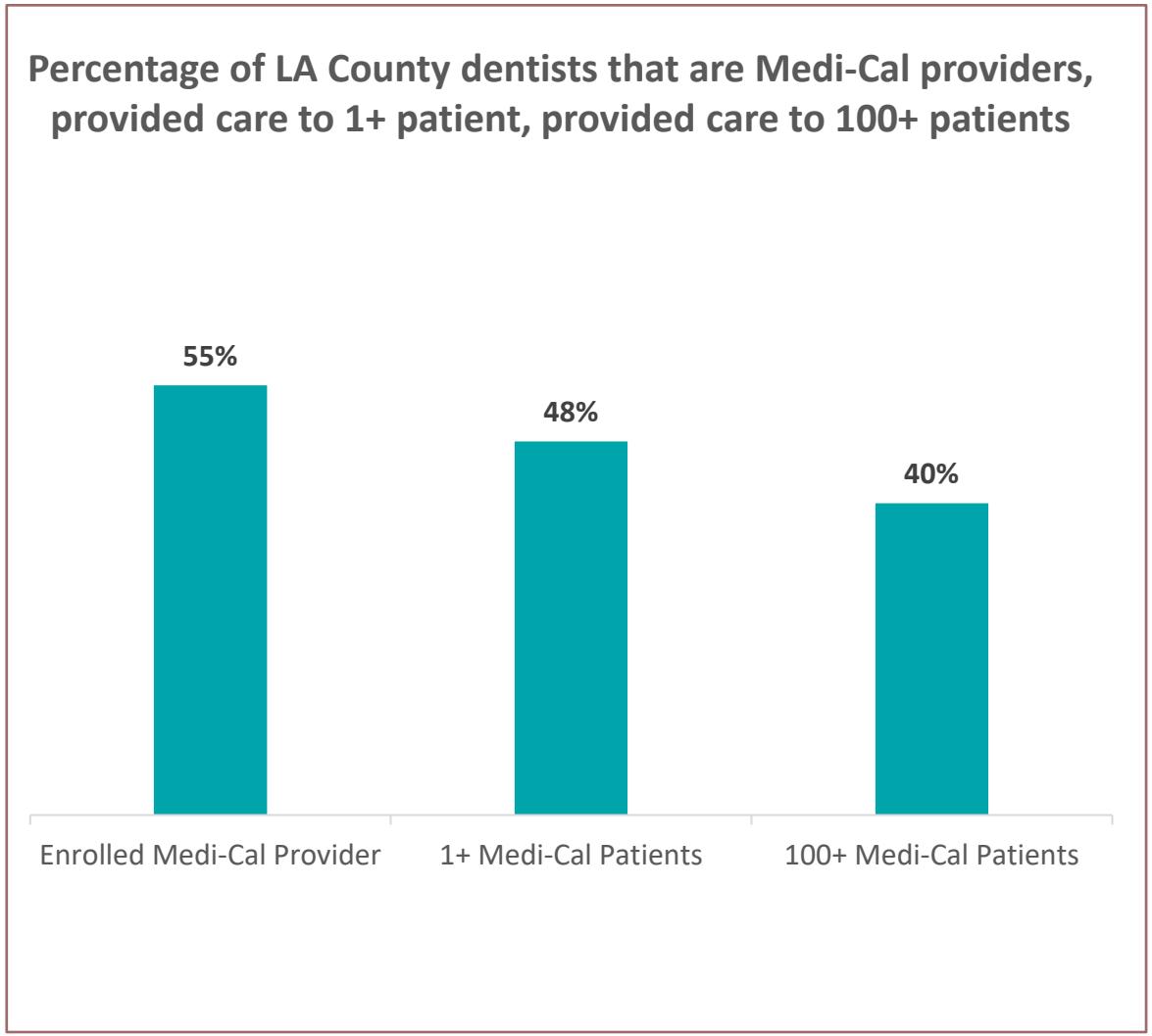


- As of February 2022, there were 8,397 dentists in Los Angeles County with a current active license, 210 with a current inactive license, and 949 with a delinquent license[1]
- Los Angeles County and California have more dentists per 100,000 population than the United States
- **NOTE:** LA County and California data is based on the number of dentists with a current active license while US data is based on the estimated number of "professionally active dentists" as defined by the American Dental Association

[1] Includes dentists whose license address is in LA County

- Data Sources: CA Department of Consumer Affairs, https://www.dca.ca.gov/consumers/public_info/index.shtml, downloaded 02-02-2022; American Dental Association, https://www.ada.org/resources/research/health-policy-institute/dentist-workforce

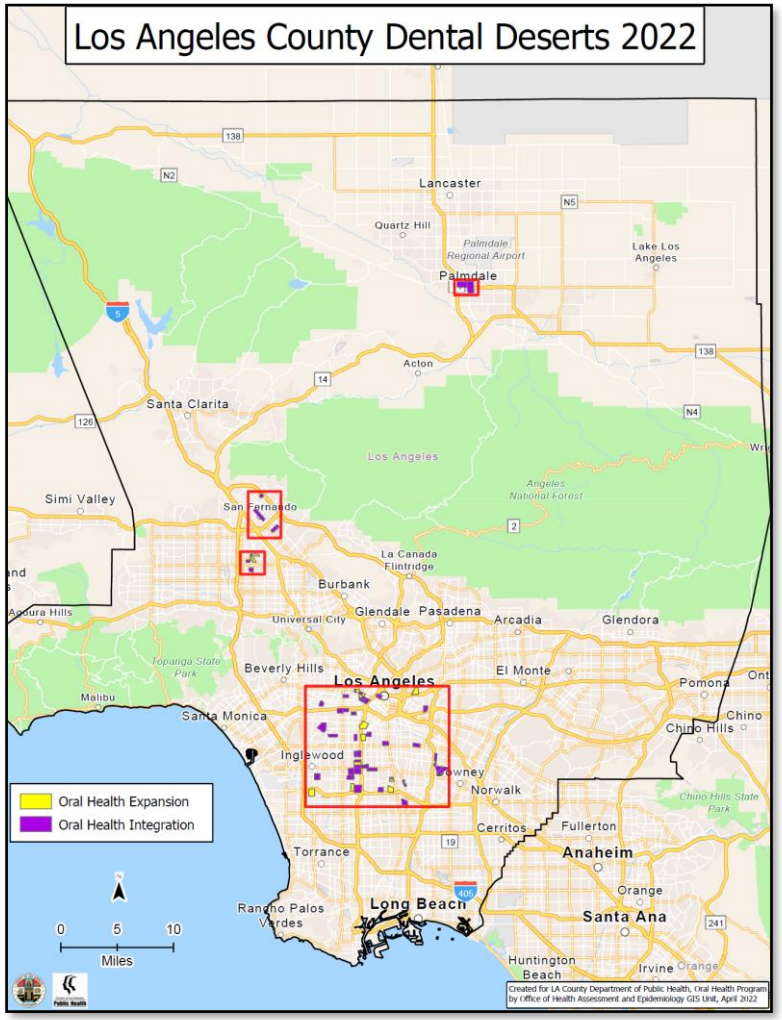
Medi-Cal Dental Providers



- In 2019, there were 4,654 dentists listed as Medi-Cal rendering providers in LA County, of which 690 (15%) were rendering providers at safety net clinics
- NOTE: The Medi-Cal dental provider files do not include license number (only provider number and county where service was provided), therefore, percentages are estimates based on the assumption that if the service was provided in LA County the dentist lives in LA County

- Data Sources: CA Department of Health Care Services, Medi-Cal Dental Per Provider Report Calendar Year 2019, https://www.dhcs.ca.gov/services/Pages/DentalReports.aspx

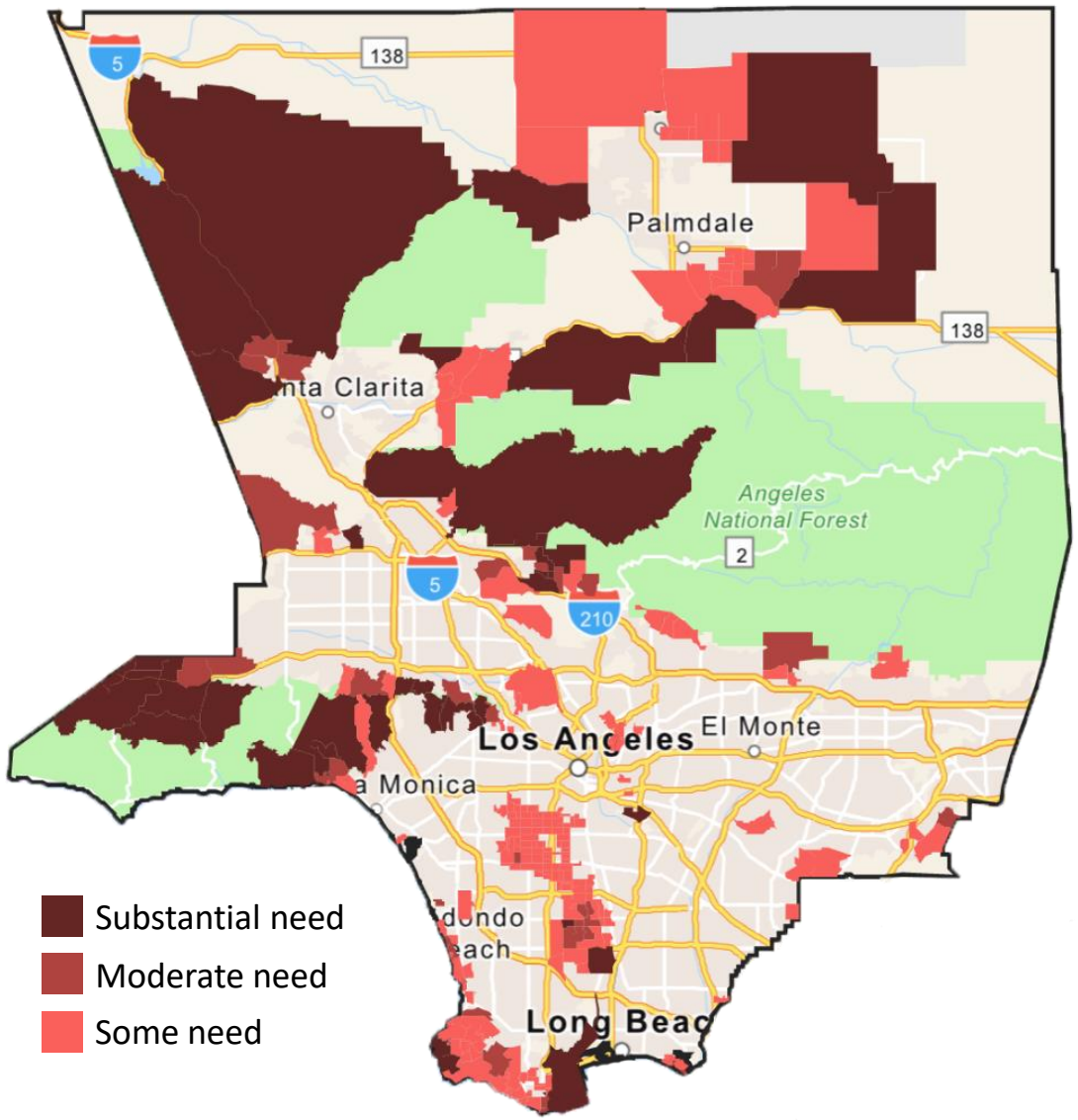
Dental Deserts in Los Angeles County



- Safety-net clinics are a core source of primary care, particularly for Medi-Cal beneficiaries and uninsured people
- The “dental deserts” in this map (purple and yellow blocks) are areas with many lower income residents but few safety-net clinics providing dental care

- Data Source: Los Angeles County Department of Public Health Oral Health Program

Areas Needing More Meaningful Medi-Cal Dentists

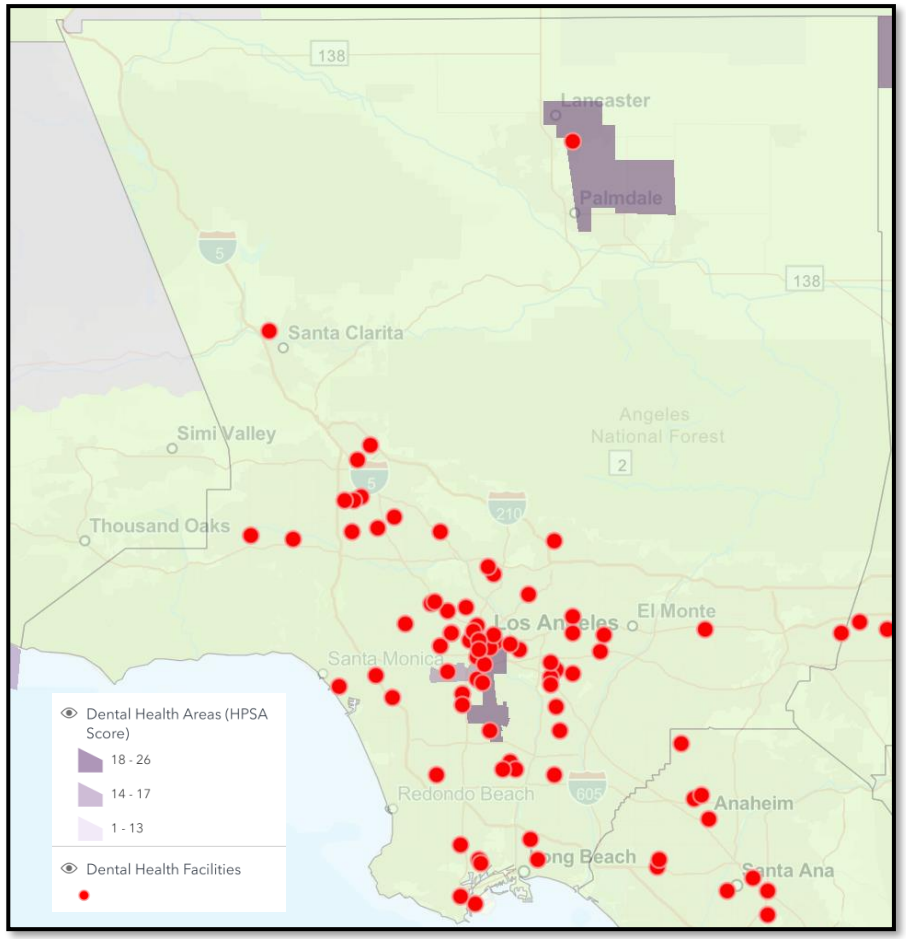


- A meaningful dentist is a dentist that: (1) bills Medi-Cal for $10,000 or more per year **or** (2) provides care to 100+ Medi-Cal patients per year
- Using 2017 Medi-Cal data for LA County, the American Dental Association, Health Policy Institute mapped the location of meaningful dentists against the number of Medi-Cal enrollees aged 0-20 years. Census tract level results were used to identify need categories based on the number of Medi-Cal enrollees aged 0-20 per meaningful dentist.
  - Substantial need: 4,000+ Medi-Cal enrollees per meaningful dentist
  - Moderate need: 3,000-3,999 Medi-Cal enrollees per meaningful dentist
  - Some need: 2,000-2,999 Medi-Cal enrollees per meaningful dentist
  - Adequate need: <2,000 Medi-Cal enrollees per meaningful dentist

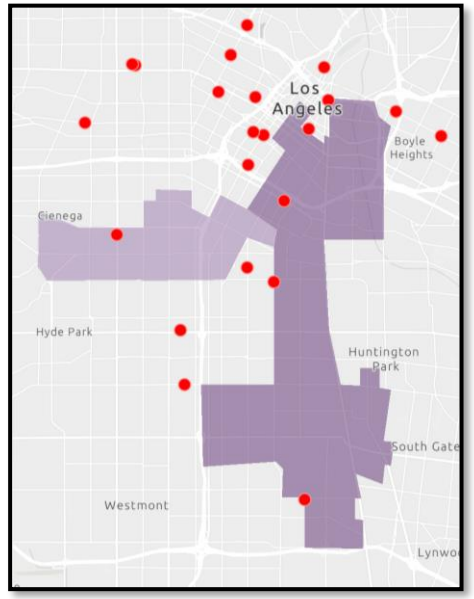
- Data Source: Los Angeles County Department of Public Health Oral Health Program

Federally Designated Dental Care Shortage Areas

Federally designated dental care Health Professional Shortage Areas (HPSAs) in LA County, 2022



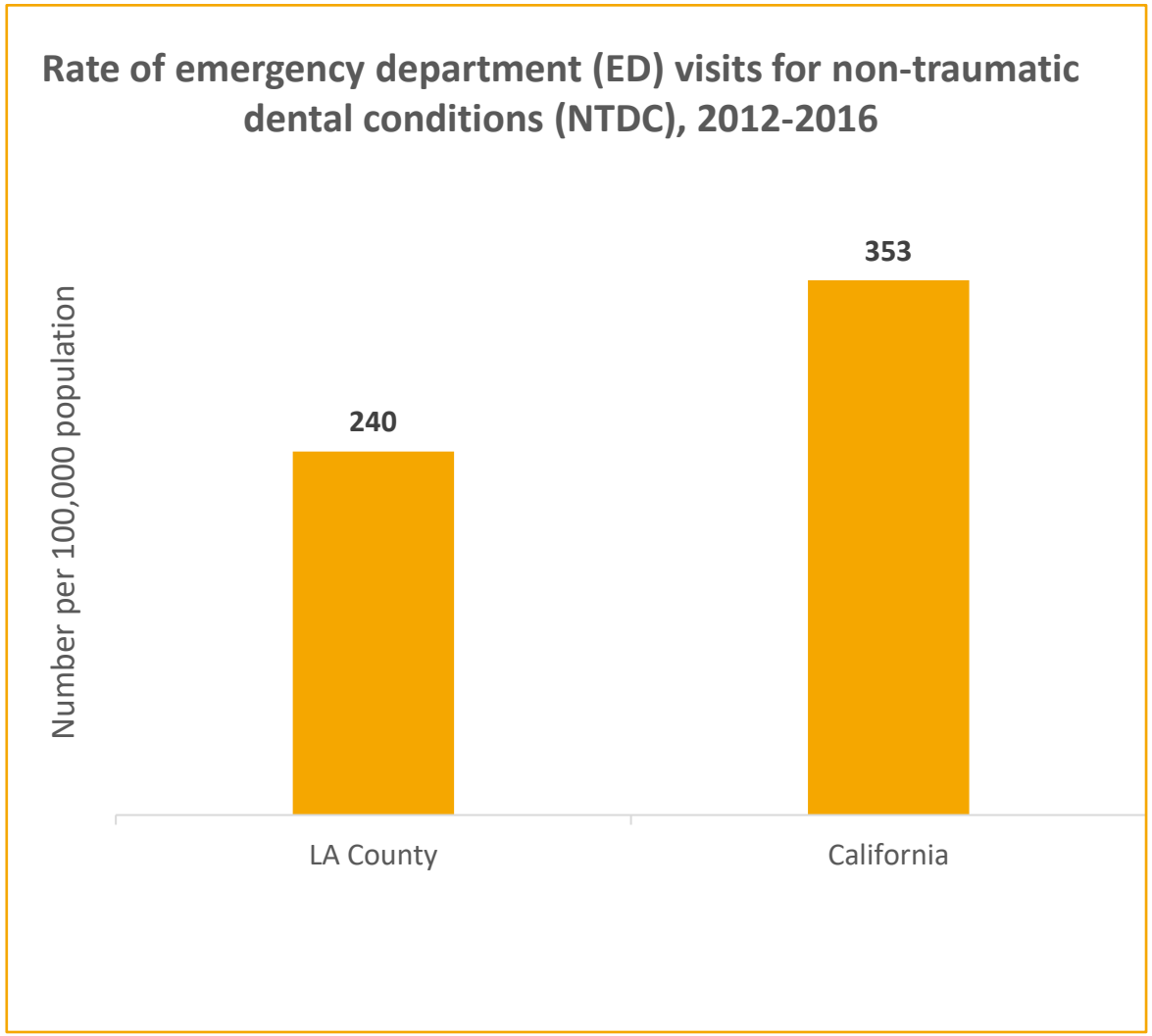
- A dental care Health Professional Shortage Area (HPSA) is a geographic area, population (low-income, homeless, Medicaid) or facility experiencing a shortage of dental care services
- 3 population HPSAs (purple blocks)
- Numerous facility HPSAs (red dots)



- Data Source: Health Resources & Services Administration, HRSA Map Tool, https://data.hrsa.gov/maps/map-tool/, generated 02-03-2022

Emergency Department Visits for Non-Traumatic Dental Conditions

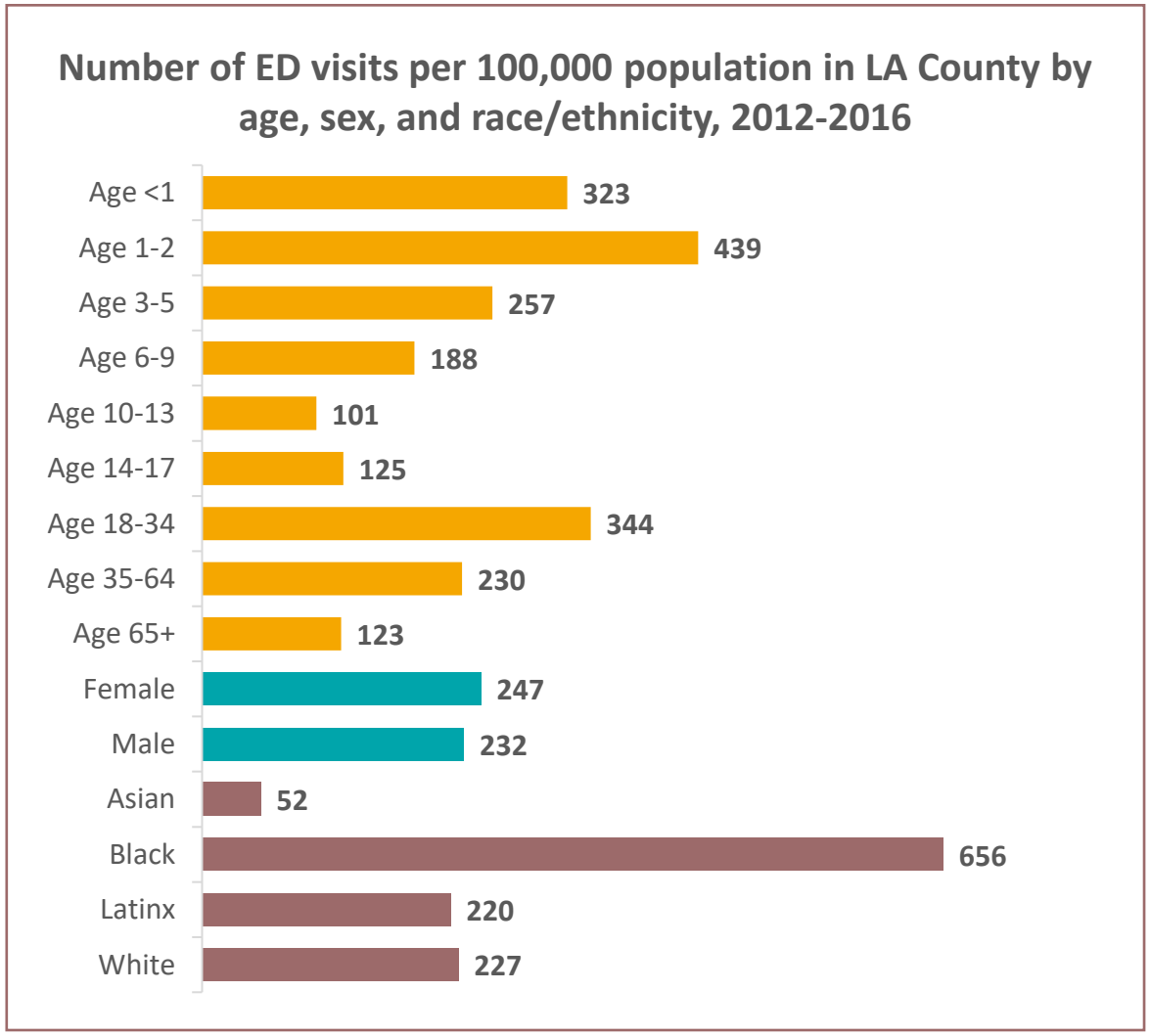
Emergency Department Visits for NTDC



- The number of ED visits for NTDCs per 100,000 population is lower in LA County than in California

- ED = Emergency department
- NTDC = Non-traumatic dental conditions
- Data Source: Office of Statewide Health Planning and Development. Analysis provided by California Department of Public Health, Office of Oral Health

ED Visits for NTDCs – LA County Disparities



The rate of ED visits for non-traumatic dental conditions is highest among children 1-2 years of age; many of these visits are associated with teething syndrome

The rate of ED visits for non-traumatic dental conditions is highest among Black/African Americans

- ED = Emergency department
- NTDC = Non-traumatic dental conditions
- Data Source: Office of Statewide Health Planning and Development. Analysis provided by California Department of Public Health, Office of Oral Health

Our Vision for Los Angeles County

A community where oral health is recognized as essential for overall health, and where everyone has the opportunity to achieve optimal health and well-being.

COUNTY OF LOS ANGELES
Public Health

Los Angeles County Department of Public Health
Oral Health Program
3530 Wilshire Blvd, Suite 1010
Los Angeles, CA 90010

Phone: (213) 351-1270
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Funded by the Office of Oral Health, California Department of Public Health, Contract #17-10698