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## **NEW REPORT IDENTIFIES KEY ELEMENTS FOR IMPROVING ORAL HEALTH QUALITY**

### ***Study Notes that Dental Expenses are Among the Highest Out-of-Pocket Health Cost to Consumers, Second Only to Prescription Drug Expenditures***

WASHINGTON – As the country strives to improve its overall health care delivery system, there is a push to make the oral health care delivery system similarly accountable for quality and access. A new report funded by the W.K. Kellogg Foundation and the DentaQuest Institute outlines an approach to expand the oral health quality improvement effort through data collection, accountability and new ways of delivering oral health care.

Although quality improvement in oral health lags behind similar efforts for overall health, these efforts are intensifying. The report, *Oral Health Quality Improvement in the Era of Accountability*, provides an overview of current efforts and cites elements that are critical for advancing this agenda: increased use of electronic dental records and integrated health records; better measurement of oral health outcomes; new payment and incentive mechanisms; and expanded delivery of care by non-dental professionals, as well as new types of allied dental professionals.

The report – the latest in a growing number of analyses of the oral health care system – was released this week at a national meeting of oral health professionals, government leaders, consumer advocates and others convened by the Kellogg Foundation and DentaQuest Institute that was intended to launch a national dialogue on quality improvement and increased access to dental care. The Institute of Medicine and U.S. Government Accounting Office released reports on dental access and quality in 2011.

“The focus on quality improvement for overall health care is an important opportunity to improve the quality of oral health care,” says study author Paul Glassman, DDS, MA, MBA, director of the Pacific Center for Special Care at University of the Pacific Arthur A. Dugoni School of Dentistry. “The biggest problem now is we are developing many measures, but they need to be connected to performance of the system. This report provides an opportunity for a new dialogue on how best to collect and use data to improve quality and increase access to affordable dental care.”

According to Glassman, the factors driving the focus on quality improvement in oral health care – and the need to align payment incentives with health care outcomes and value for patients – are the same ones driving the overall health care quality movement:

- The increasing cost of oral health care;
- An increasing understanding of the unwarranted variability produced by the oral health system;

- Evidence of profound health disparities in spite of scientific advances in care; and
- Increasing awareness of these problems in the age of consumer empowerment.

The report also outlines the systemic barriers that have slowed change:

- Limited evidence of best practice for most dental procedures has led to widespread variation in clinical decisions among dentists;
- Government only pays for about six percent of dental care nationally, and dental practices and their patients are not part of a larger provider organization pushing for improvements; and
- Incentives to implement quality improvement programs are few.

However, increasing costs, inadequate access to care, and profound disparities are creating new pressures for the oral health delivery system to focus on value instead of volume of services.

“With the current focus on quality improvement in health care, we need to make sure that oral health isn’t left behind,” said Alice Warner, program officer at the W.K. Kellogg Foundation. “Right now, 37 percent of African American children and 41 percent of Hispanic children have untreated tooth decay, compared with 25 percent of white children. We need to do better by all our children and this report provides ideas that can help lead the way.”

#### **Oral Health Costs Making Dental Services Unaffordable for Many**

Dental expenses are now among the highest out-of-pocket health expenditures for consumers. In 2008, they accounted for \$30.7 billion or 22.2 percent of total out-of-pocket health expenditures, second only to prescription medications, according to the Bureau of Labor Statistics.

The keys to better access and quality are better measurement of oral health care outcomes and promoting innovation at the systems level, says Glassman, who suggests that the pathway to better measurement will involve:

- Increased use of electronic health records to make collection and analysis of data easier
- Development and use of measures of oral health outcomes
- Development and use of diagnostic coding systems on oral health outcomes of populations
- Innovation in payment, monitoring and incentive mechanisms tied to the oral health of the population served
- Improvements in oral health delivery that include using chronic disease management strategies, delivering care in nontraditional settings, developing new types of allied dental professionals and engaging non-dental professionals in delivering services
- Use of telehealth technologies to reach people in geographically remote areas

“The DentaQuest Institute is working closely with clinical partners to implement quality improvement strategies that emphasize prevention and disease management in dental care,” according to Dr. Mark Doherty, executive director of the DentaQuest Institute. “We have begun to see success applying a disease management model to the care of chronic disease.”

#### **About the DentaQuest Institute**

The DentaQuest Institute ([www.dentaquestinstitute.org](http://www.dentaquestinstitute.org)) is a not-for-profit organization focused on improving efficiency, effectiveness and quality in dental care. The Institute works with clinical partners

across the United States to develop and implement more effective approaches to preventing and managing oral diseases. For more information about the DentaQuest Institute and its programs, visit [DentaQuestInstitute.org](http://DentaQuestInstitute.org). The DentaQuest Institute is supported by DentaQuest, a leading oral health company, administering prevention-focused dental benefits to nearly 15 million individuals across the United States. The report and related materials are available on the DentaQuest Institute website at <http://dentaquestinstitute.org/quality-improvement-era-accountability> .

**About the W.K. Kellogg Foundation**

The W.K. Kellogg Foundation, founded in 1930 by breakfast cereal pioneer Will Keith Kellogg, is among the largest philanthropic foundations in the United States. Based in Battle Creek, Mich., WKKF engages with communities in priority places (Michigan, Mississippi, New Mexico and New Orleans), nationally and internationally to create conditions that propel vulnerable children to realize their full potential in school, work and life. To learn more, visit [www.wkkf.org](http://www.wkkf.org) or follow WKKF on twitter at [@wk\\_kellogg\\_fdn](https://twitter.com/wk_kellogg_fdn). The report and related materials are available on the W.K. Kellogg Foundation website at <http://www.wkkf.org/news/Articles/2012/01/New-report-on-oral-health-quality.aspx>.

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