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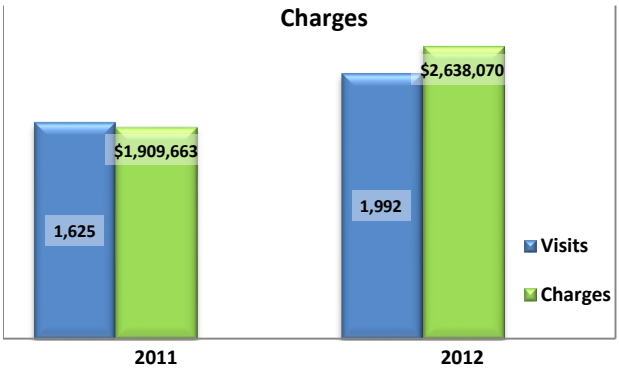
ST. LUCIE COUNTY ORAL HEALTH FACT SHEET[1]

EMERGENCY DEPARTMENT USE BY RESIDENTS FOR PREVENTABLE CONDITIONS:[2] 2011 & 2012

Emergency Department Dental Visits & Charges



Ambulatory Care Sensitive oral health conditions (ACS) are those considered largely avoidable with adequate prevention and primary care. The use of hospital emergency departments – among the most expensive form of medical care – for the treatment of ACS conditions may indicate lack of access to primary dental care. Among the reasons Floridians do not receive regular preventive care include lack of dental coverage for adult Medicaid patients, lack of private-practice dentists willing to accept Medicaid's low payment rates, lack of county health department resources, lack of affordable dental insurance or inability to meet high co-pays, and lack of awareness of the importance of dental health to overall health.

Floridians absorb the cost of Medicaid and uninsured ER dental visits in several ways including higher health insurance premiums and healthcare costs, increased tax dollars needed to fund the state Medicaid program, increased local tax dollars to support local public hospitals, and lost productivity.

Visits by Payor & Age

	0-19	19-34	35-49	50-64	65+
2011	**221**	**814**	**392**	**147**	**51**
Medicaid/Managed	149	278	100	22	0
Commercial	12	64	37	32	2
Self-Pay/Uninsured	54	426	211	56	2
Kidcare	1	0	0	0	0
Medicare/Managed	0	28	37	32	47
All Other	5	18	7	5	0
2012	**289**	**1,010**	**437**	**189**	**67**
Medicaid/Managed	195	379	119	30	0
Commercial	20	77	54	35	3
Self-Pay/Uninsured	60	486	184	74	5
Kidcare	4	0	0	0	0
Medicare/Managed	0	29	53	44	59
All Other	10	39	27	6	0

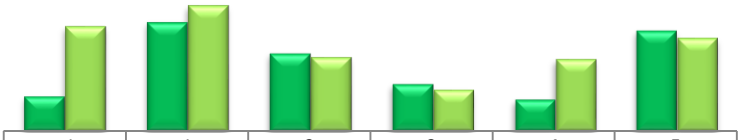
Charges by Payor & Age

	0-19	20-34	35-49	50-64	65+
2011	**248,078**	**859,628**	**504,230**	**189,939**	**107,788**
Medicaid/Managed	166,872	305,123	155,653	27,814	-
Commercial	20,134	69,899	44,043	47,513	1,902
Self-Pay/Uninsured	56,233	440,533	249,773	65,279	1,346
Kidcare	866	-	-	-	-
Medicare/Managed	-	25,110	48,285	37,499	104,540
All Other	3,973	18,963	6,476	11,834	-
2012	**333,203**	**1,160,380**	**719,292**	**316,239**	**108,956**
Medicaid/Managed	238,886	472,748	164,409	76,315	-
Commercial	23,766	83,405	88,283	55,026	2,452
Self-Pay/Uninsured	58,734	525,245	298,154	102,292	4,367
Kidcare	3,667	-	-	-	-
Medicare/Managed	-	31,370	123,340	67,967	102,137
All Other	8,150	47,612	45,106	14,639	-

Visits for Young Children for Preventable Conditions

	<1	1	2	3	4	5
2011	8	24	22	9	7	18
2012	19	28	19	13	21	20

Charges for Young Children for Preventable Conditions



	<1	1	2	3	4	5
2011	$8,943	$27,760	$19,862	$12,053	$8,184	$25,588
2012	$26,803	$32,091	$18,933	$10,676	$18,467	$23,824

Highest ED Dental ACS Visits by Zip Code

	2011		2012	
	Visits	Charges	Visits	Charges
34953	**246**	**271,000**	**334**	**371,055**
34952	**223**	**233,069**	**247**	**249,921**
34950	**221**	**331,345**	**300**	**455,865**
34983	**219**	**206,185**	**283**	**323,102**
34982	**190**	**229,929**	**230**	**340,287**
34947	**157**	**204,326**	**138**	**268,375**
34984	**82**	**83,422**	**93**	**78,564**
34951	**76**	**62,036**	**103**	**115,867**
34986	**68**	**92,736**	**90**	**144,952**

Policy Indicators

Indicators to consider in shaping policies to increase the overall health of Floridians while decreasing costs to the state's healthcare system:

- *High numbers of Medicaid patients visiting the ER for ACS dental problems suggest a lack of access to dentists or oral healthcare clinics accepting Medicaid for both preventative care and for treatment.*
- *ER visits during the regular work day and traditional business hours, combined with ACS diagnoses, suggest visits being made to the ER in lieu of a clinic or dental office.*
- *Rates of adult tooth decay are higher in older adults yet patients aged 20 to 34 years comprise the largest segment of ER visits, suggesting that lack of dental insurance or an inability to meet high co-pays is driving such visits.*

[1] Source: Emergency Room Database, Florida Agency on Health Care Administration
[2] Ambulatory care sensitive dental conditions, i.e. "preventable condition," are based on the ICD-9 (International Classification of Diseases, 9th Edition) codes from the published work of Dr. John Billings http://wagner.nyu.edu/files/admissions/acs_codes.pdf).

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