

Virginia earns a C+ when compared to the nation's performance on nine key oral health indicators. The good news? We can do better.

Oral health is overall health. Good oral health is important for a healthy body; poor oral health is linked to diabetes, heart disease, inability to learn and work, and even preterm birth. But dental disease is preventable. With renewed focus, investment, and innovation, Virginia can achieve the best oral health in the nation.



The table below outlines the nine key oral health indicators and Virginia's 2022 grade in green. See the reverse page for a comparison to the *2016 Report Card* and grading criteria.

27%



of children aged 1-2 had a preventive dental visit through Medicaid.



When children see the dentist by age one, it saves money and improves health outcomes.

59%



of children and teens aged 3-20 had a preventive dental visit through Medicaid.



Preventive dental visits are vital to maintaining healthy teeth and gums, laying the foundation for lifelong oral health.

Coming Soon

Third graders who experienced tooth decay.**



Tooth decay is the most common chronic disease of childhood - 5 times more prevalent than asthma.

Coming Soon

Third graders who have a dental sealant on their permanent molars.**



Sealants are among the most effective and inexpensive ways to prevent cavities.

3%



of Medicaid pediatric medical providers applied fluoride varnish last year.



The AAP recommends young children receive fluoride varnish as part of a wellchild visit. 96%



of people on public water systems have fluoridated water.



Fluoridated water enables Virginians of all ages easy access to proven cavity prevention.

48%



of pregnant people had a cleaning during pregnancy.



Dental care is safe and necessary during pregnancy. Poor oral health can lead to negative birth outcomes, like low birth weight. 47%



of adults aged 45-64 lost at least one tooth because of tooth decay or gum disease.



Tooth loss can contribute to poor nutrition, lack of employment, and social isolation.

31%



of adults do not have dental coverage.



Adults with dental coverage are more likely to visit a dentist for preventive care and take their children to see a dentist.

^{*}No national benchmark exists; therefore, Virginia receives an "NB" for no benchmark.

^{**}Data collection delayed due to COVID-19 restrictions in schools.

Comparing 2016 and 2022 Virginia Oral Health Report Card

The table below identifies the rates and grades for the 2016 and 2022 indicators, and the change in rates between the two reporting periods.

| Indicator | Change | 2016 - 2022 (grade and rate) | Details |
|--|-------------|-------------------------------------|---|
| Medicaid children aged 1-2 with a preventive dental visit | Improvement | C → C 27% | Higher rate of children with preventive dental visits |
| People on public water systems have fluoridated water | No change | A 96% → A 96% | Rate remained constant |
| Adults aged 45-64 with tooth loss | Improvement | C 50% → C 47% | Lower rate of adults with tooth loss |
| Adults without dental coverage | Improvement | C → B 31% | Lower rate of adults without dental coverage |
| Third graders who have dental sealants on permanent molars | Coming soon | A 52% | Data collection delayed due to COVID-19 restrictions in schools |
| Third graders who experienced tooth decay | Coming soon | C 47% | Data collection delayed due to COVID-19 restrictions in schools |

Changed Indicators

The three indicators in the table below cannot be compared due to methodological changes.

| 2016 Indicator | Grade Rate | 2022 Indicator | Grade Rate | Details |
|--|---------------|--|---------------|--|
| Medicaid children and teens aged 1-20 with a preventive dental visit | C 53% | Medicaid children and teens aged 3-20 with a preventive dental visit | B 59% | Rates cannot be compared - age group changed from 2016 to 2022 |
| Medicaid medical providers who applied fluoride varnish | NB 5% | Medicaid medical providers who applied fluoride varnish | NB 3% | Rates cannot be compared - data collection timeframe changed from 2016 to 2022 |
| Pregnant people who visited the dentist | D 44% | Pregnant people who had a teeth cleaning | C 48% | Rates cannot be compared - survey item changed from 2016 to 2022 |

Technical Notes

Each indicator of the *Virginia Oral Health Report Card* is assigned a score based on how Virginia performs compared to a national benchmark. Letter grades are awarded for each indicator depending on how far above or below Virginia's percentage is relative to the national benchmark. The letter grades have certain point values associated with them, as described in the table to the right. Then, the overall grade for Virginia is calculated by averaging the points for all nine indicators.

| Grade | Points | Criteria | |
|-------|--------|---|--|
| Α | 4 | ≥20% better than national | |
| В | 3 | 10 to 20% better than national | |
| С | 2 | 0 to 10% change from national | |
| D | 1 | 10 to 20% worse than national | |
| F | 0 | ≥20% worse than national | |
| NB | | No national benchmark (NB); will monito progress going forward | |