

## Healthy People 2010 Operational Definition

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### **21-12. Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.**

<b>National Data Source</b>	Medical Expenditure Panel Survey (MEPS), AHQR.
<b>State Data Source</b>	Not identified.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Changes since the 2000 Publication</b>	Revised baseline (see Comments). Revised target (see Comments).
<b>Measure</b>	Percent.
<b>Baseline (Year)</b>	25 (1996)
<b>Target</b>	66
<b>Target Setting Method</b>	Better than the best racial/ethnic subgroup.  For a discussion of target-setting methods, see Part A, section 4.
<b>Numerator</b>	Number of persons under age 19 years at or below 200 percent of the Federal poverty level who received a preventive dental visit during the last year.
<b>Denominator</b>	Number of persons under age 19 years at or below 200 percent of the Federal poverty level.
<b>Population Targeted</b>	U.S. civilian, noninstitutionalized population.
<b>Questions Used To Obtain the National Baseline Data</b>	From the 1996 Medical Expenditure Panel Survey. See <a href="http://www.meps.ahcpr.gov/survey.htm">http://www.meps.ahcpr.gov/survey.htm</a> for more information.
<b>Expected Periodicity</b>	Periodic.
<b>Comments</b>	MEPS data provide information on the nature of the dental visit as well as dental insurance status of the patient. MEPS data are also used for objective 21-12, preventive dental visits for poor children. MEPS data provide a comprehensive assessment of a previous dental visit. Subjects are interviewed on five different occasions over 15 months, so that they

do not need to recall details of dental care received more than 3 months beforehand. In addition, MEPS subjects are also asked for specific information about care received at each visit. Therefore, the numbers of visits during a year are substantiated with additional corroborating evidence. MEPS was used as the database for dental visits in the April 2000 Government Accounting Office report to Congress on access to dental care.

The original baseline of 20 percent was revised to 25 percent as a result of a change in the operational definition. The new definition defines a preventive dental visit as one in which the patient receives an examination, a dental sealant, fluoride treatment, dental prophylaxis (professional tooth cleaning by a dental hygienist or dentist), or X-ray examination.

The target was proportionally adjusted from 57 percent to 66 percent to reflect the revised baseline using the original target-setting method.

For some measures, data do not meet the criteria for statistical reliability, data quality, or confidentiality and have been suppressed. Information on suppression of data for the major Healthy People 2010 data systems has been published in a *Healthy People Statistical Note*.<sup>1</sup>

See Part C for a description of MEPS and Appendix A for focus area contact information.

## References

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1. Klein, R.J.; Proctor, S.E.; Boudreault, M.A.; Turczyn, K.M. Healthy People 2010 Criteria for Data Suppression. *Statistical Notes* No. 24. Hyattsville, MD: National Center for Health Statistics. 2002.