

Indicator C.6. Prevention: Sealant Receipt on Permanent 1st Molars

Description:	Percentage of enrolled children who have ever received sealants on permanent first molar teeth: (1) at least one sealant and (2) all four molars sealed by the 10th birthday. This indicator is a Dental Quality Alliance (DQA) measure .
What data source is used?	Administrative enrollment and claims data are used to calculate this indicator. This indicator can be applied to both public program and commercial (private payer) administrative claims. This indicator is recommended for states to report for their pediatric Medicaid and Children's Health Insurance Program (CHIP) beneficiaries. Reporting on this indicator may also be possible for children with dental benefits through state health insurance exchanges or children represented in all-payer claims databases.
Who is the target population?	Children who have their 10 th birthday during the reporting year and are enrolled in a program (e.g., Medicaid/CHIP) or a dental plan.
How is the indicator measured?	<p>The indicator reports two percentages based on the same denominator [numerator/denominator x 100%]:</p> <div style="border: 1px solid black; border-radius: 15px; padding: 10px; background-color: #e6f2ff;"> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; border-radius: 10px; padding: 5px; width: 45%;"> <p>Numerator 1: The subset of children in the denominator who ever received <u>at least one sealant</u> on a permanent <u>first</u> molar tooth</p> </div> <div style="border: 1px solid black; border-radius: 10px; padding: 5px; width: 45%;"> <p>Numerator 2: The subset of children in the denominator who ever received sealants on <u>all four</u> permanent <u>first</u> molar teeth</p> </div> </div> <hr style="border: 0.5px solid black; margin: 5px 0;"/> <p>Denominator: Number of children with their 10th birthday in the reporting year</p> </div>
Are any children excluded?	Children who have received treatment (restorations, extractions, endodontic, prosthodontic, and other dental treatments) on <u>all four</u> permanent first molars prior to the 10th birthday should be excluded. Children who do not qualify for dental benefits should also be excluded.
What does this indicator measure and why is it important?	This indicator is a process measure of whether children are receiving evidence-based care . Dental caries is the most common chronic disease in children in the United States. ⁱ In 2015–2016, 45.8% of youth ages 2–19 had dental caries (both treated and untreated), and 13% had untreated caries. ⁱⁱ Identifying caries early is important to reverse the disease process, prevent progression of caries, and reduce the likelihood of future caries. Evidence-based guidelines recommend that sealants be placed on the pits and fissures of permanent molars as effective prevention to reduce dental caries. ⁱⁱⁱ
Are there any limitations to this indicator?	Claims data cannot identify teeth with active decay, sealants not billed to the program/plan, or treatment (e.g., restorations/extractions) not billed to the program/plan, which will impact the precision of the denominator and the numerator.
Where can I get more information about Dental Quality Alliance (DQA) measures?	<ul style="list-style-type: none"> • The technical specifications for this indicator are available from DQA. • All DQA measures and user guides are available online.

ⁱ Centers for Disease Control and Prevention. 2016. [Hygiene-Related Diseases: Dental Caries](#). Atlanta, GA: Centers for Disease Control and Prevention.

ⁱⁱ Fleming E, Afful J. 2018. [Prevalence of Total and Untreated Dental Caries Among Youth: United States, 2015–2016](#). NCHS Data Brief, no 307. Hyattsville, MD: National Center for Health Statistics.

ⁱⁱⁱ Wright JT, Crall JJ, Fontana M, Gillette EJ, Nový BB, Dhar V, Donly K, Hewlett ER, Quinonez RB, Chaffin J, Crespin M, Lafolla T, Siegal MD, Tampi MP, Graham L, Estrich C, Carrasco-Labra A. 2016. [Evidence-based clinical practice guideline for the use of pit-and-fissure sealants: A report of the American Dental Association and the American Academy of Pediatric Dentistry](#). *Journal of the American Dental Association* 147(8): 672–682e.12.