

# Chartbook: The Oral Health of Los Angeles County's Residents



LA County Department of Public Health  
Oral Health Program  
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# Introduction

- This chartbook highlights current data on topics associated with the oral health of LA County's residents including, but not limited to
  - Tooth decay in children and tooth loss in adults
  - Oral and pharyngeal (throat) cancer
  - Use of the dental care delivery system
  - Access to preventive services
  - Dental workforce
- Each topic area includes graphs with current data and, when available, data on disparities and trends
- The chartbook is updated as new data becomes available



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# Oral Health of LA County's Children

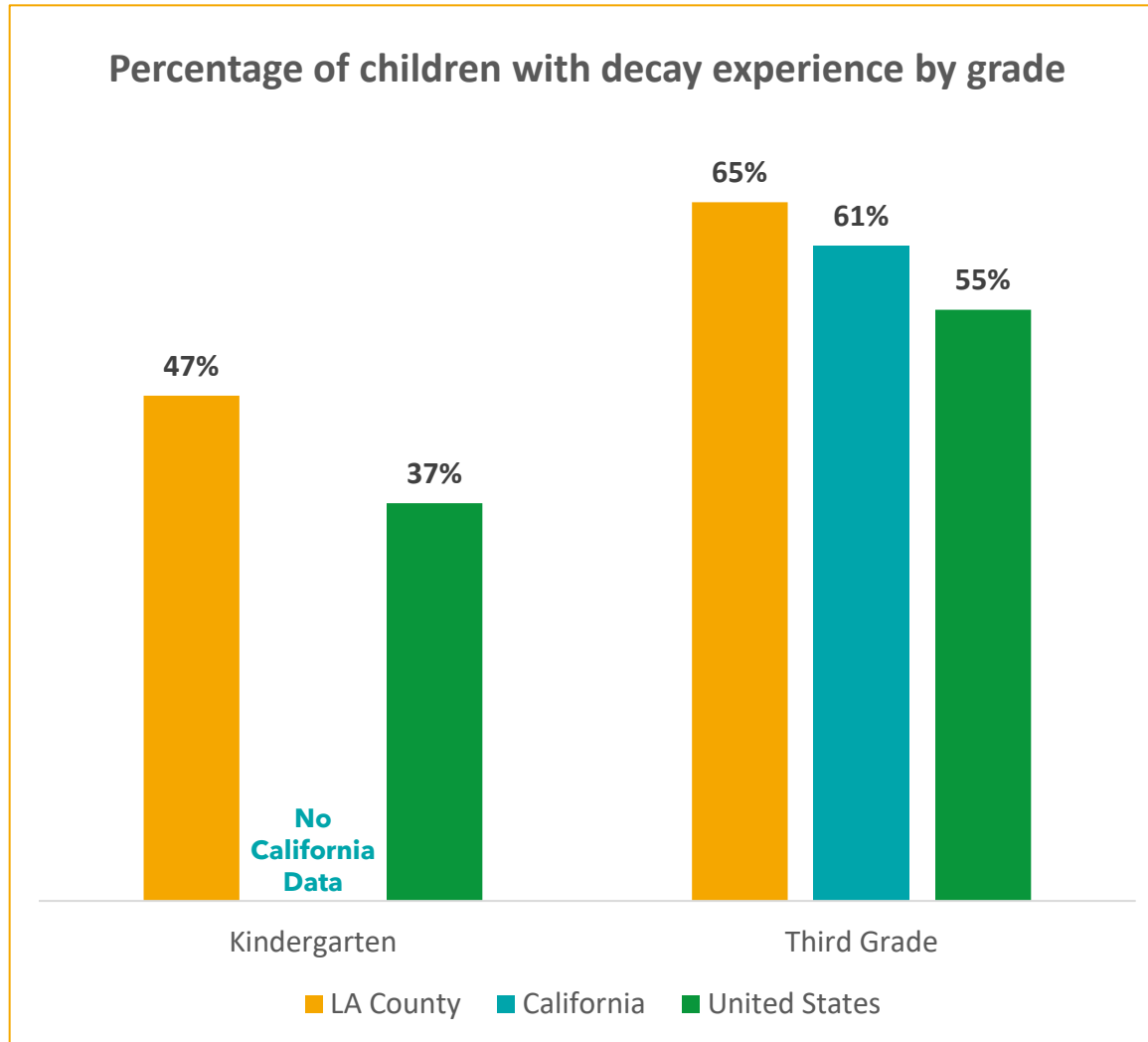
**Tooth Decay Experience  
Untreated Tooth Decay  
Dental Sealants**

# ORAL HEALTH OF LA COUNTY'S CHILDREN

## DATA-AT-A-GLANCE

Grade/Indicator	LA County 2005	LA County 2020	California 2018-2019	United States 2011-2016	United States 2017-2020
<b>Kindergarten</b>				<b>5 Year Olds</b>	<b>5 Year Olds</b>
Tooth decay experience	56%	47%	NA	42%	37%
Untreated decay	25%	19%	NA	15%	16%
<b>Third grade</b>				<b>3<sup>rd</sup> Grade</b>	<b>8 Year Olds</b>
Decay experience	74%	65%	61%	60%	55%
Untreated decay	27%	21%	22%	20%	18%
Dental sealants	21%	31%	37%	42%	32%
<b>Kindergarten &amp; third combined</b>					
Decay experience	66%	55%	NA	NA	NA
Untreated decay	26%	20%	NA	NA	NA

# Tooth Decay Experience - Overall Prevalence

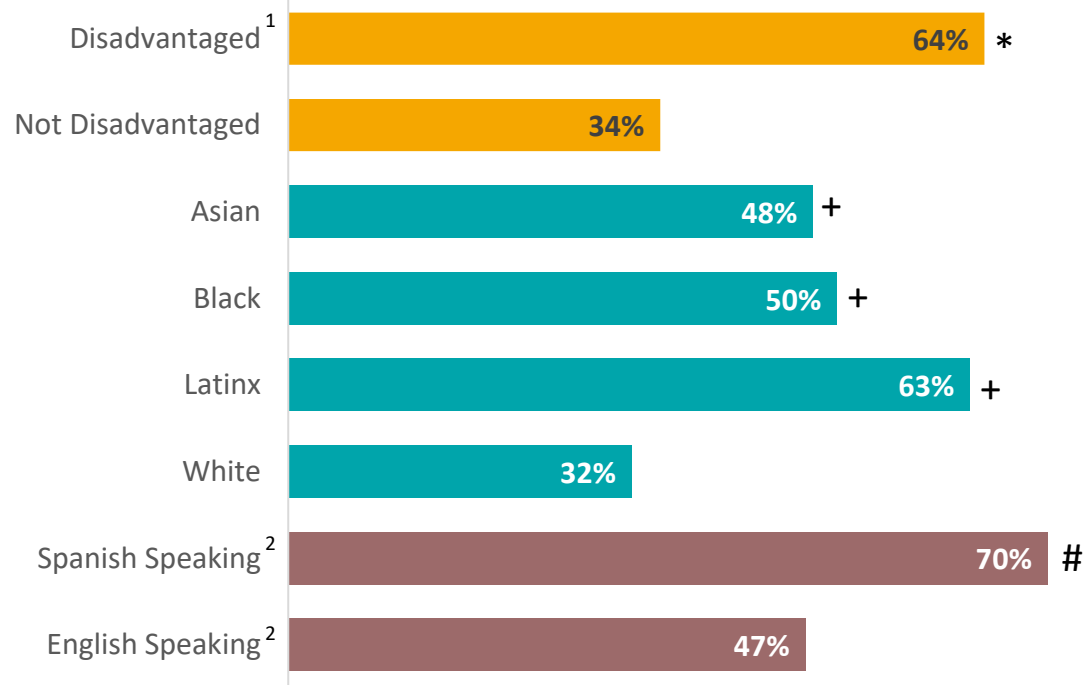


- Kindergarten
  - Compared to the U.S. average, children in LA County have a higher prevalence of decay experience
  - California data for kindergarten is not available
- Third grade
  - Compared to California and the U.S. average, children in LA County have a higher prevalence of decay experience

- Decay experience means that a child has had tooth decay at some point during his or her lifetime. Decay experience can include evidence of past treatment (e.g., fillings, crowns, or teeth that have been extracted because of decay) or evidence of untreated decay at the present time (e.g., untreated cavities).
- Data Sources: Los Angeles County Smile Survey 2020, California Smile Survey 2018-2019, National Health and Nutrition Examination Survey 2017-March 2020 (Secondary analyses, 5-year-old children (kindergarten) and 8-year-old children (third grade))

# Tooth Decay Experience - LA County Disparities

Percentage of kindergarten and third grade children with decay experience by income, race/ethnicity, and parent's primary language



\*Significantly higher prevalence than not disadvantaged

+Significantly higher prevalence than white children

#Significantly higher prevalence than children from English speaking households



Lower income children are significantly more likely to have tooth decay compared to their higher income peers



Children from racial/ethnic minority groups are significantly more likely to have tooth decay compared to White children



Children from households where Spanish is the primary language are significantly more likely to have tooth decay compared to children from English speaking households

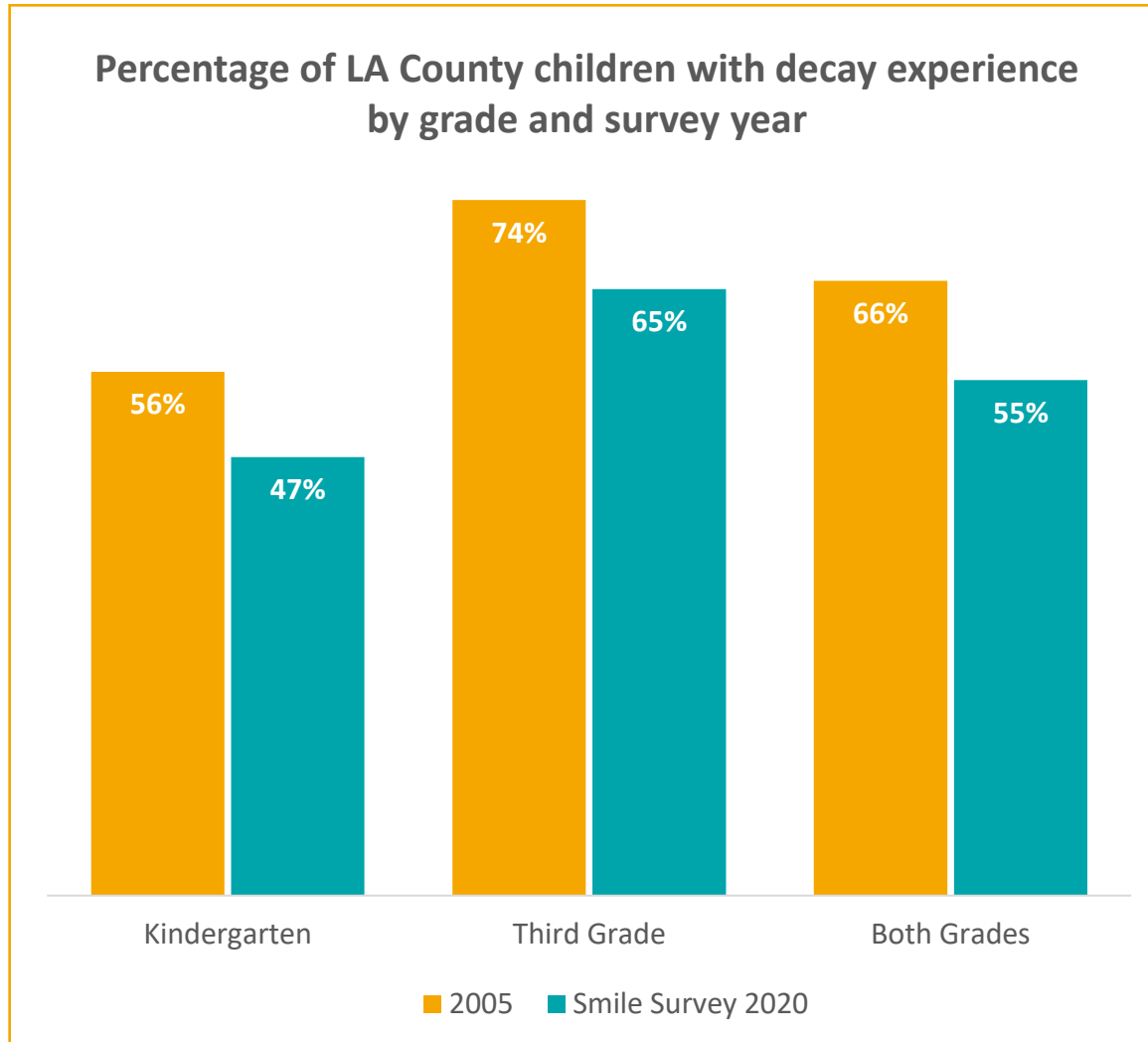
<sup>1</sup> Children identified by the California Department of Education (CDE) as being a migrant, a foster child, or homeless at any time during the academic year; being eligible for the National School Lunch Program at any time during the academic year; or having parents who did not receive a high school diploma.

<sup>2</sup> Parents primary language, also known as "native language" obtained by the CDE using the Home Language Survey.

• Decay experience means that a child has had tooth decay at some point during his or her lifetime. Decay experience can include evidence of past treatment (e.g., fillings, crowns, or teeth that have been extracted because of decay) or evidence of untreated decay at the present time (e.g., untreated cavities).

• Data Source: Los Angeles County Smile Survey 2020

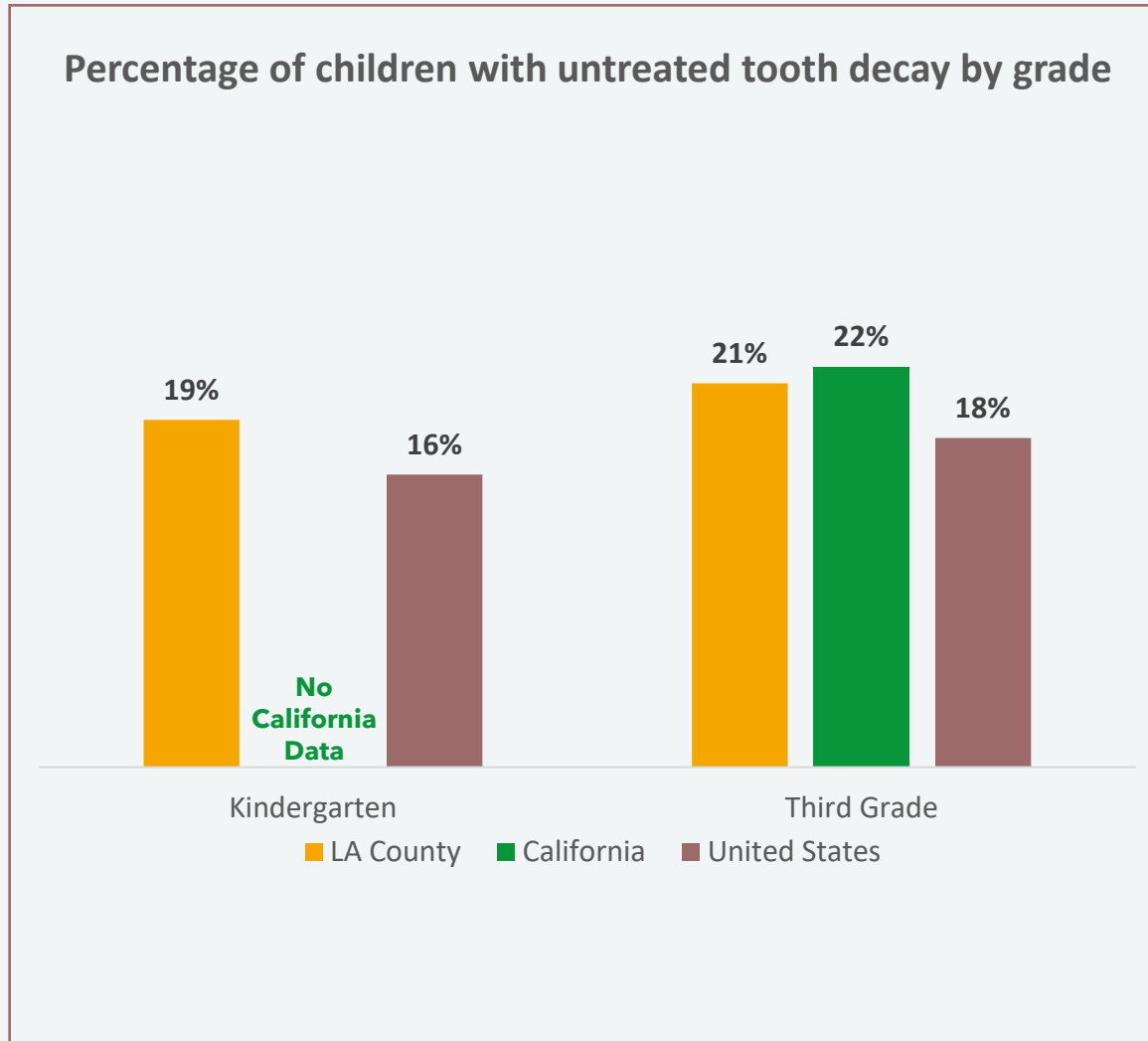
# Tooth Decay Experience - LA County Trends



- Since 2005, there has been a significant reduction in the percentage of children with tooth decay experience

- Decay experience means that a child has had tooth decay at some point during his or her lifetime. Decay experience can include evidence of past treatment (e.g., fillings, crowns, or teeth that have been extracted because of decay) or evidence of untreated decay at the present time (e.g., untreated cavities).
- Data Source: California Smile Survey 2005 (secondary analysis of data from LA County schools), Los Angeles County Smile Survey 2020

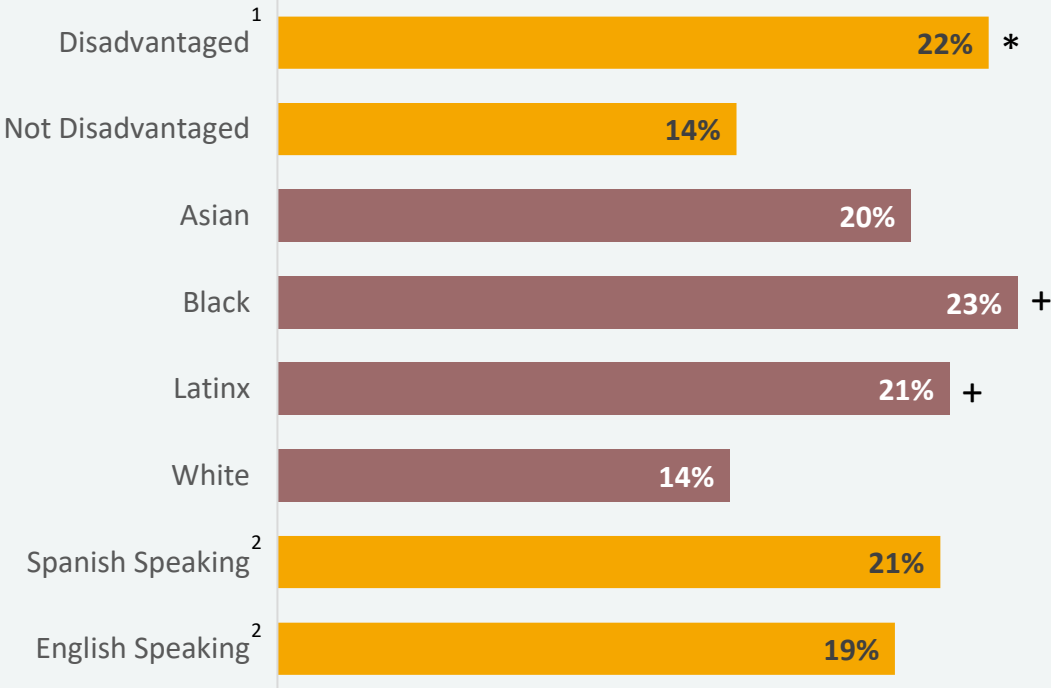
# Untreated Tooth Decay - Overall Prevalence



- Kindergarten
  - Compared to the U.S. average, children in LA County have a higher prevalence of untreated decay
  - California data for kindergarten is not available
- Third grade
  - Compared to the U.S. average, children in LA County have a higher prevalence of untreated decay

# Untreated Tooth Decay - LA County Disparities

Percentage of LA County kindergarten and third grade children with untreated decay by income, race/ethnicity, and parent's primary language



\*Significantly higher prevalence than not disadvantaged  
+Significantly higher prevalence than white children



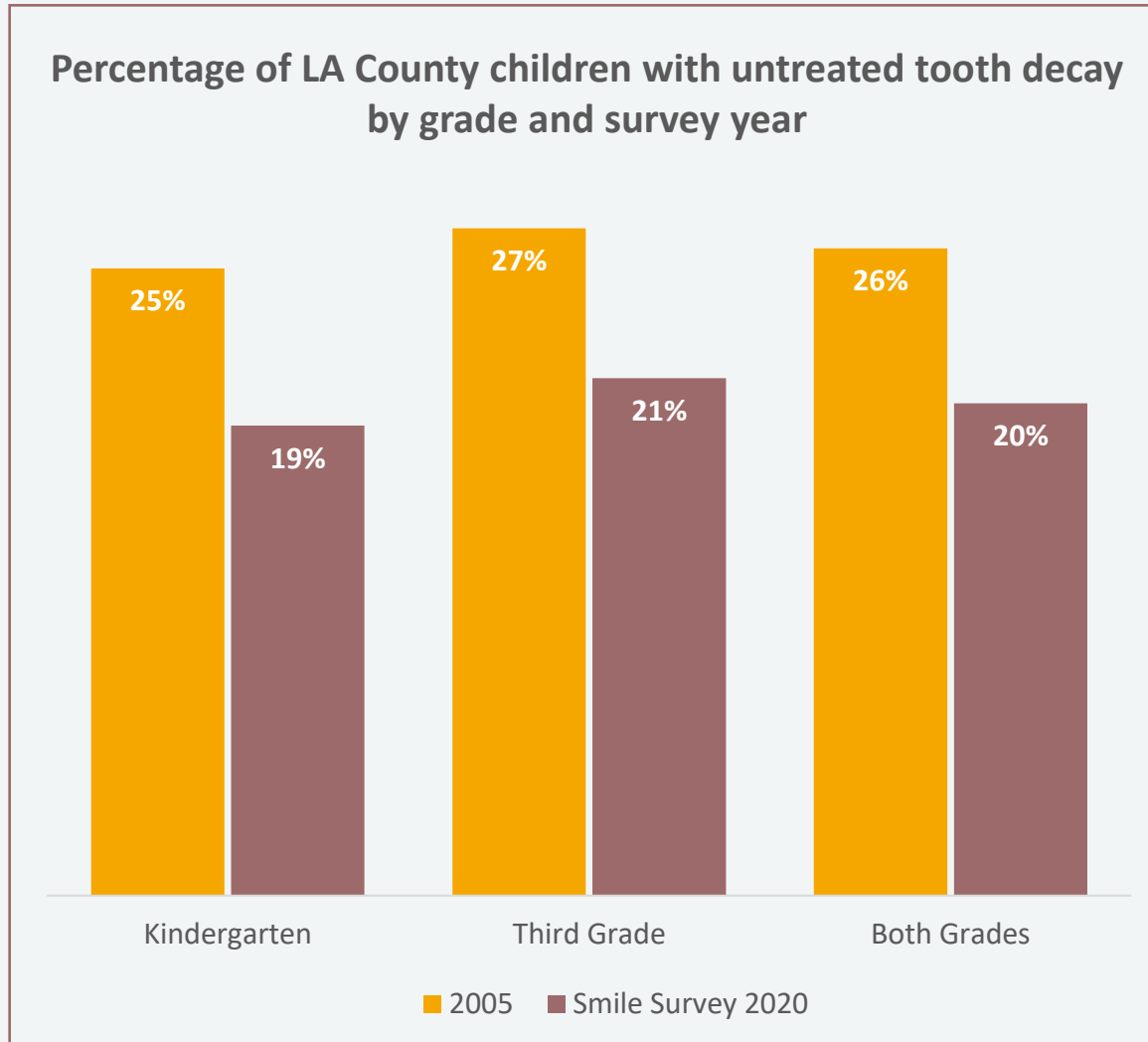
Lower income children are significantly more likely to have untreated tooth decay compared to their higher income peers



Compared to White children, Black/African American and Latinx children are significantly more likely to have untreated tooth decay

<sup>1</sup> Children identified by the California Department of Education (CDE) as being a migrant, a foster child, or homeless at any time during the academic year; being eligible for the National School Lunch Program at any time during the academic year; or having parents who did not receive a high school diploma.  
<sup>2</sup> Parents primary language, also known as "native language" obtained by the CDE using the Home Language Survey.

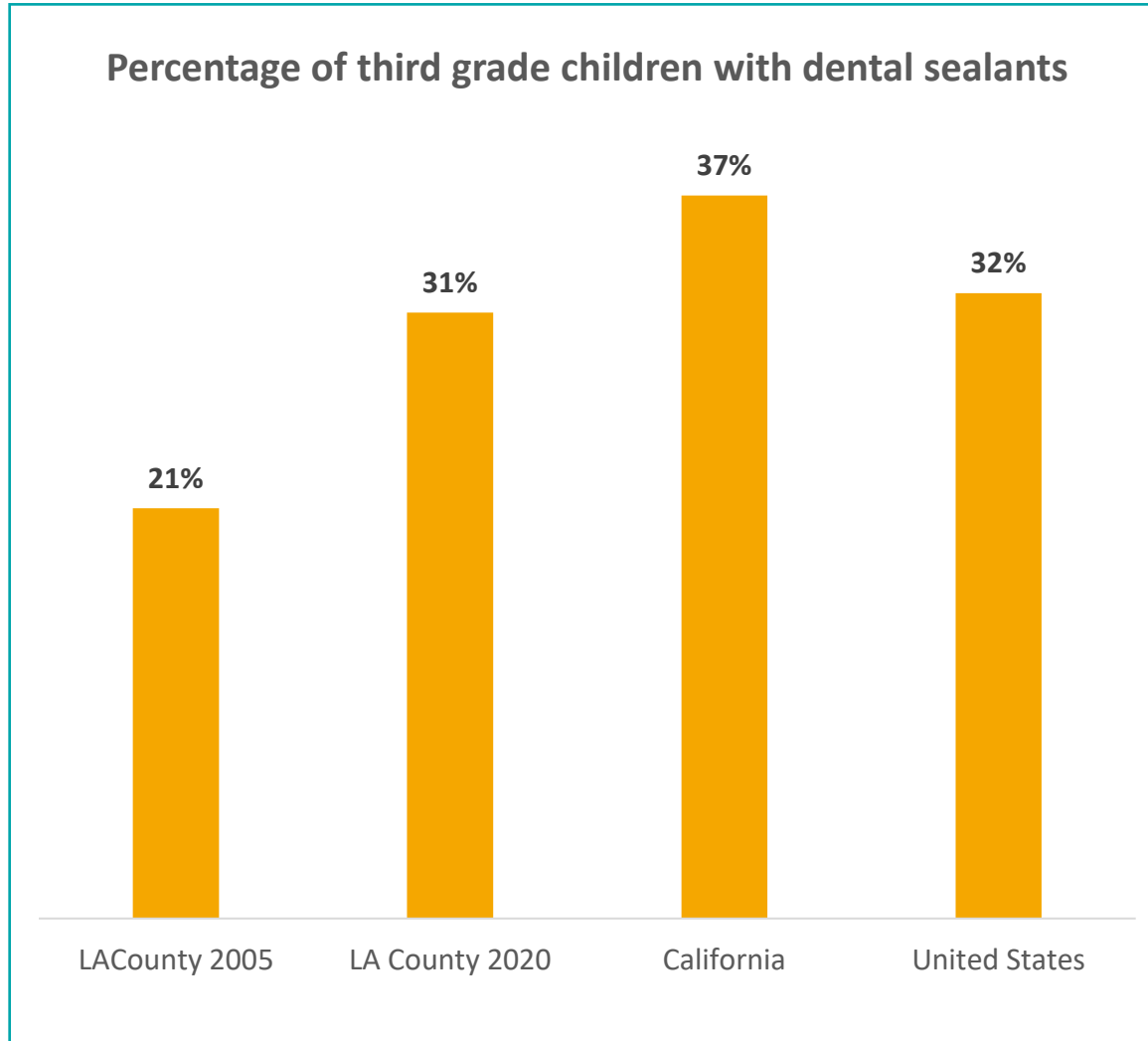
# Untreated Tooth Decay - LA County Trends



- Since 2005, there has been a significant reduction in the percentage of children with untreated tooth decay

- Untreated tooth decay means that a child has evidence of tooth decay (e.g., one or more cavities) that has not received treatment
- Data Source: California Smile Survey 2005 (secondary analysis of data from LA County schools), Los Angeles County Smile Survey 2020

# Dental Sealants - Prevalence, Disparities & Trends



- Although the percentage of 3<sup>rd</sup> grade children in LA County with sealants increased from 2005 to 2020, the prevalence falls below the state average but is similar to the national average.
- Sealant disparities have been addressed - the percentage of children in LA County with sealants does not vary by income, race/ethnicity, or parent's primary language



# Oral Health of LA County's Adolescents 12-17 Years

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**Condition of teeth**

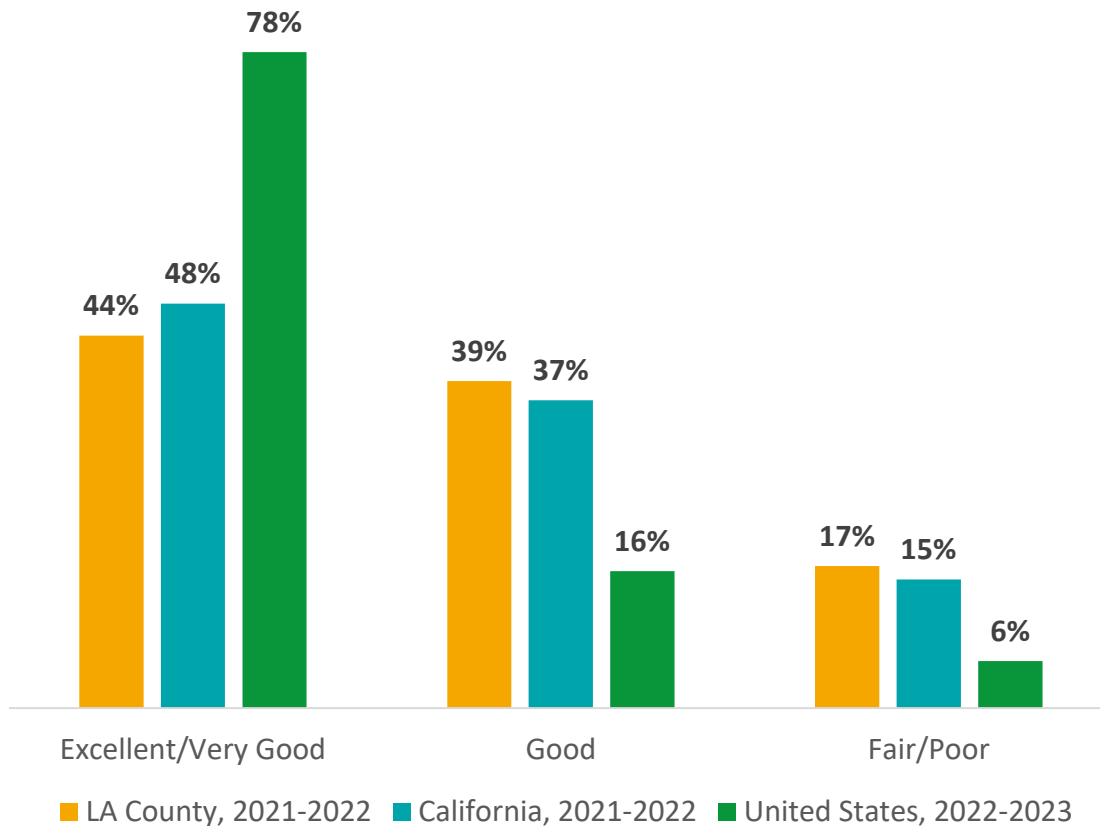
# ORAL HEALTH OF LA COUNTY'S ADOLESCENTS 12-17 Years

## DATA-AT-A-GLANCE

Indicator	LA County 2007	LA County 2019-2020	LA County 2020-2021	LA County 2021-2022	California 2019-2020	California 2020-2021	California 2021-2022	United States 2022-2023
<b>Self-reported condition of teeth</b>								
Excellent/very good	47%	57%	49%	44%	57%	52%	48%	NA
Good	40%	28%	33%	39%	32%	35%	37%	NA
Fair/poor	13%	15%	18%	17%	12%	13%	15%	NA
<b>Parent-reported condition of teeth</b>					<b>California 2019-2020</b>	<b>California 2020-2021</b>	<b>California 2022-2023</b>	<b>United States 2022-2023</b>
Excellent/very good	NA	NA	NA	NA	73%	71%	75%	78%
Good	NA	NA	NA	NA	20%	21%	19%	16%
Fair/poor	NA	NA	NA	NA	7%	8%	6%	6%

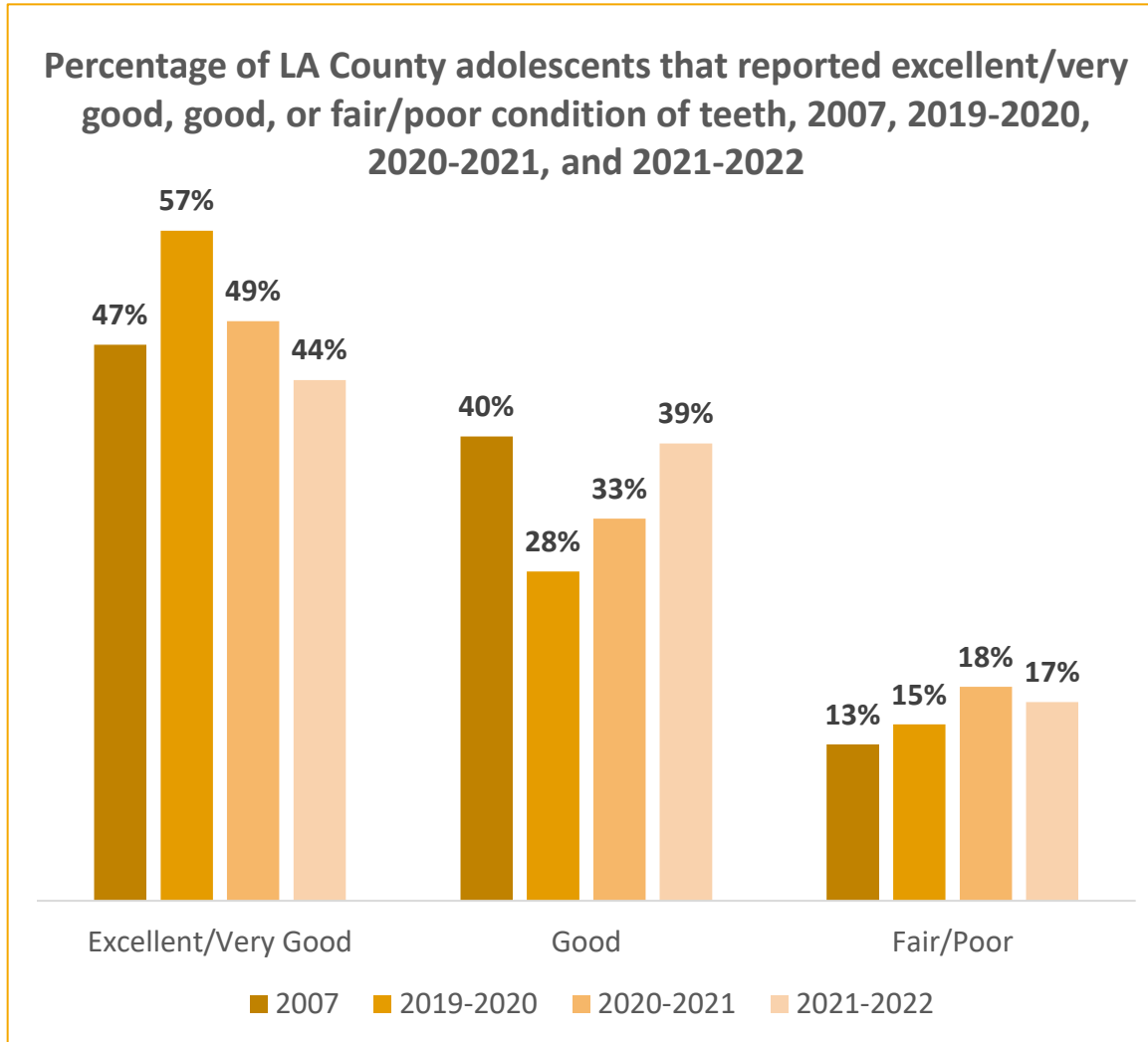
# Self-Reported Condition of Teeth - Overall Prevalence

Percentage of adolescents aged 12-17 years that reported excellent, very good, good, or fair/poor condition of teeth



- Compared to the United States average, a lower percentage of LA County and California adolescents reported that the condition of their teeth was excellent/very good
  - **IMPORTANT NOTE:** US data is from the National Survey of Children's Health which asks **parents** to rate the oral health of their child's teeth. LA County and California data is from the California Health Interview Survey which asks the **adolescent** to rate the condition of their own teeth.

# Self-Reported Condition of Teeth - Trends



- Since 2019-2020, there has been a decrease in the percentage of adolescents that report excellent or very good condition of teeth and an increase in the percentage reporting fair/poor condition of teeth
- This may be due to issues associated with the availability of dental care during COVID-19



# Oral Health of Adults in LA County

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**Any tooth loss in adults 18+**  
**Total tooth loss in adults 65+**  
**Self-reported condition of teeth**  
**Oral and pharyngeal cancer**

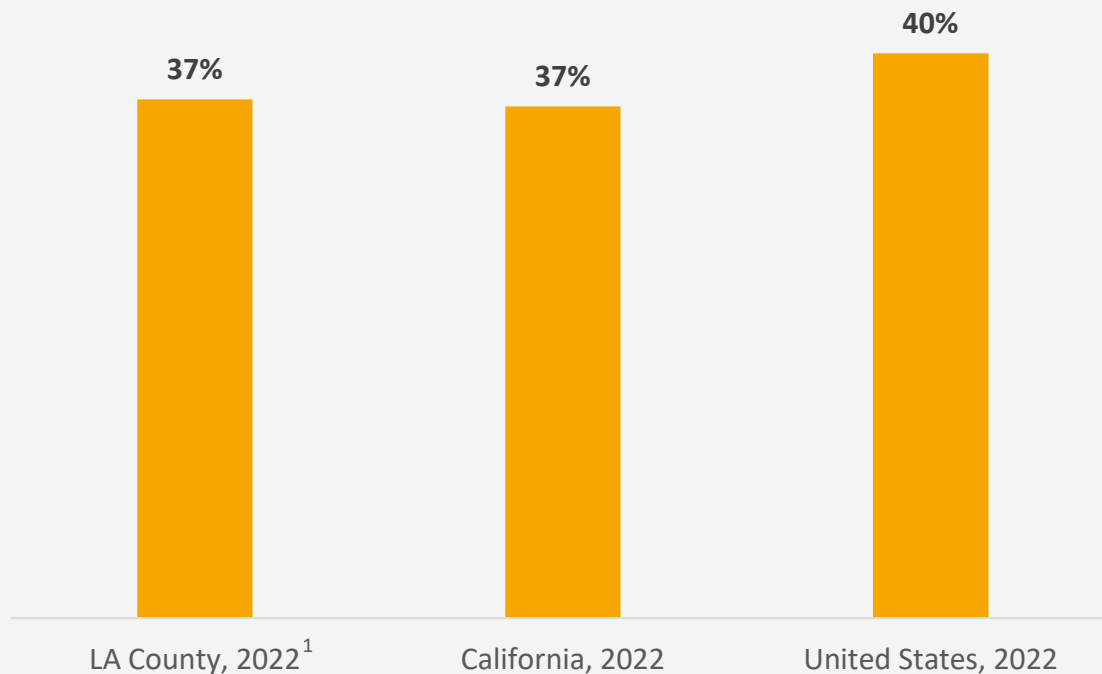
# ORAL HEALTH OF ADULTS IN LA COUNTY

## DATA-AT-A-GLANCE

Age/Indicator	LA County	California	United States
<b>18+ Years</b>			
Any tooth loss	37% (2022)	37% (2022)	40% (2022)
Fair/poor self-reported condition of teeth	30% (2021-2022)	27% (2021-2022)	NA
<b>65+ Years</b>			
Total tooth loss	6% (2022)	7% (2022)	12% (2022)
<b>All Ages</b>			
Incidence of oral & pharyngeal cancer (annual age adjusted rate per 100,000)	8.3 (2017-2021)	10.1 (2017-2021)	12.0 (2017-2021)
Mortality from oral & pharyngeal cancer (annual age adjusted rate per 100,000)	2.2 (2018-2022)	2.4 (2018-2022)	2.6 (2018-2022)

# Any Tooth Loss in Adults 18+ Years - Overall Prevalence

Percentage of adults 18+ years that have had any permanent teeth extracted (removed) due to dental disease  
(Age adjusted prevalence for LA & CA, crude prevalence for U.S.)

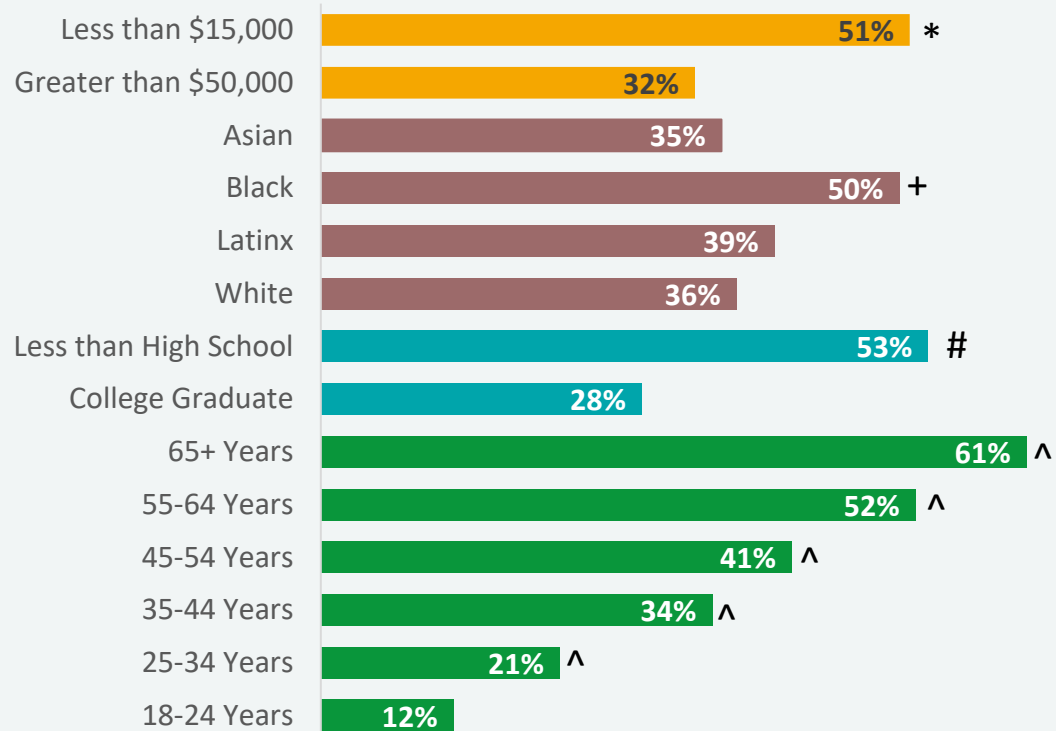


<sup>1</sup>LA County data is from the Los Angeles-Long Beach-Anaheim Metropolitan Statistical Area which includes Los Angeles and Orange Counties

- The percentage of adults in LA County and California that have had any permanent teeth removed is lower than the national average

# Any Tooth Loss in Adults - California<sup>1</sup> Disparities

Percentage of California<sup>1</sup> adults aged 18+ years with any tooth loss by income, race/ethnicity, education, and age, 2022



\*Significantly higher prevalence than > \$50,000  
 +Significantly higher prevalence than White adults  
 #Significantly higher prevalence than college graduates  
 ^Significantly higher prevalence than adults 18-24 years



Lower income adults are significantly more likely to have missing teeth compared to higher income adults



Black/African American adults are significantly more likely to have missing teeth compared to White adults



Adults with less than a high school education are significantly more likely to have missing teeth compared to adults with a college degree



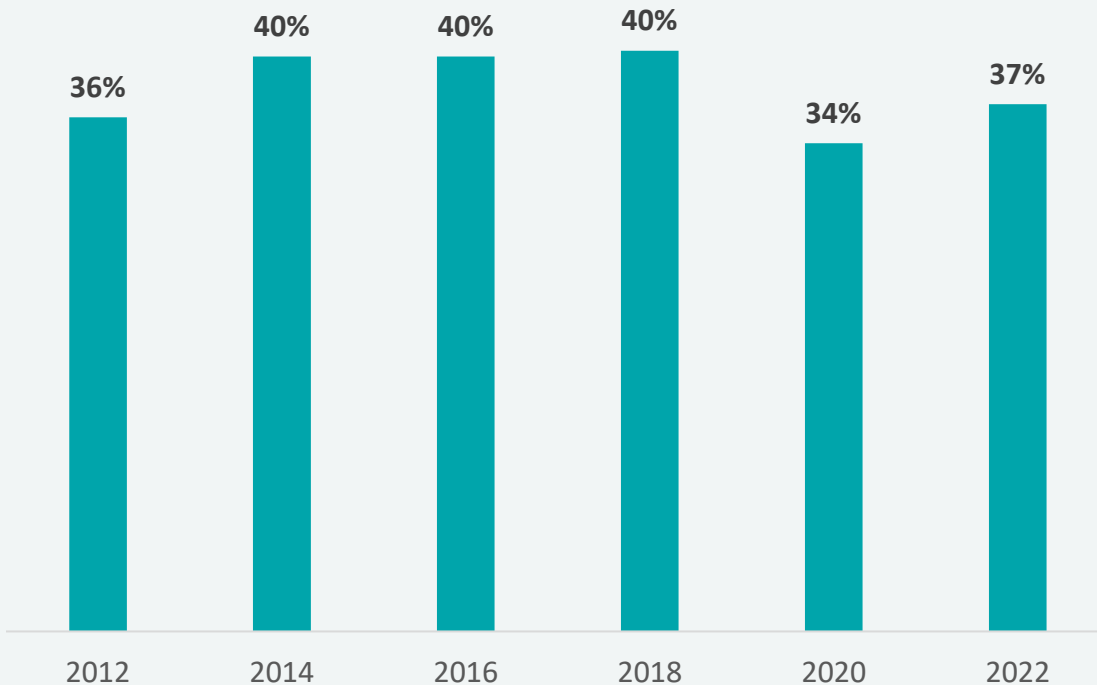
The percentage of adults with missing teeth increases significantly with age

<sup>1</sup> Because of small sample sizes, LA County data is not available

- Any tooth loss means that the person has had one or more permanent (adult) teeth extracted (removed) because of dental disease (does not include teeth removed because of orthodontics or injury).
- Data Sources: Behavioral Risk Factor Surveillance System (BRFSS), 2022, <https://www.cdc.gov/brfss/brfssprevalence/>
- Accessed 06-17-2025

# Any Tooth Loss in Adults - LA County Trends

Percentage of LA County<sup>1</sup> adults 18+ years that have had any permanent teeth extracted due to dental disease by year<sup>2</sup>

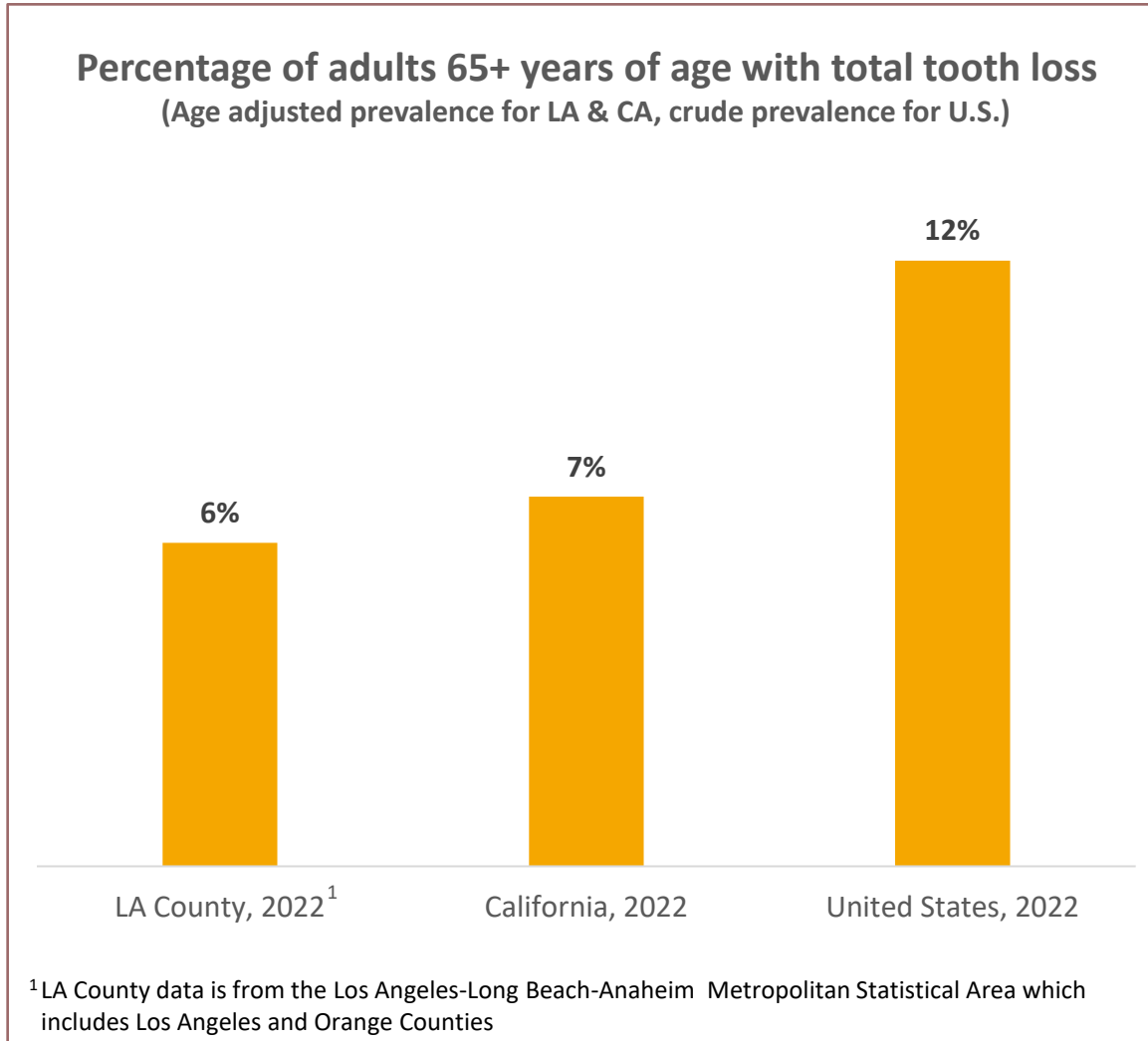


<sup>1</sup> LA County data is from the Los Angeles-Long Beach-Anaheim Metropolitan Statistical Area which includes Los Angeles and Orange Counties

<sup>2</sup>Age adjusted

- Since 2012, the percentage of adults that have had any permanent teeth removed has remained stable

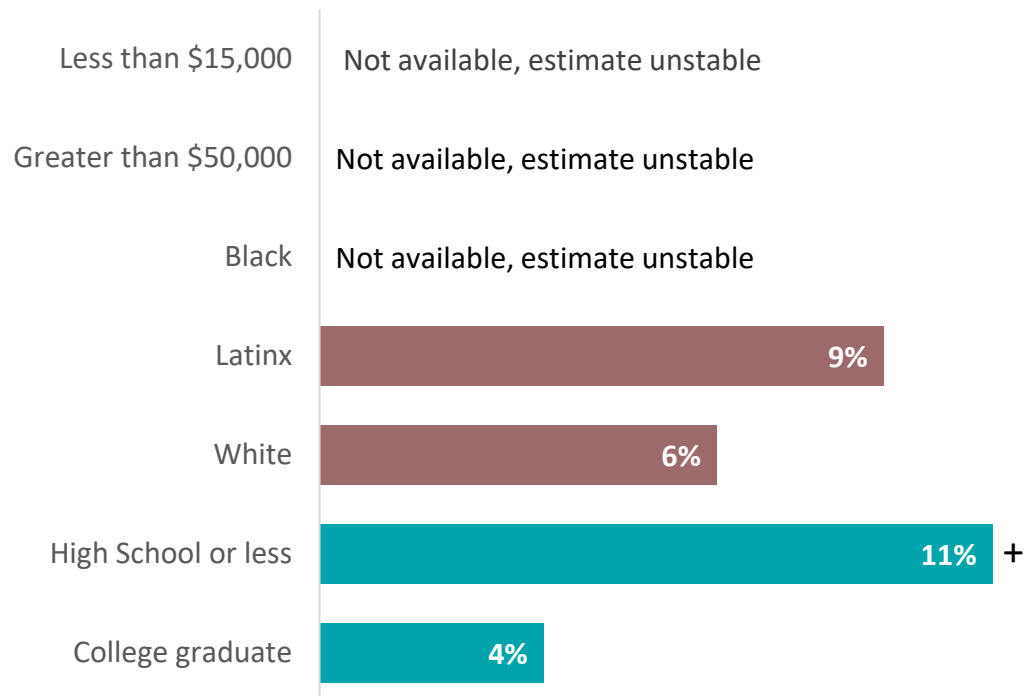
# Total Tooth Loss in Adults 65+ Years - Overall Prevalence



- The prevalence of total tooth loss among older adults is lower in LA County and California compared to the national estimate

# Total Tooth Loss in Adults 65+ Years - California<sup>1</sup> Disparities

Percentage of California<sup>1</sup> adults aged 65+ years with total tooth loss by income, race/ethnicity, and education, 2022



+Significantly higher prevalence than college graduate



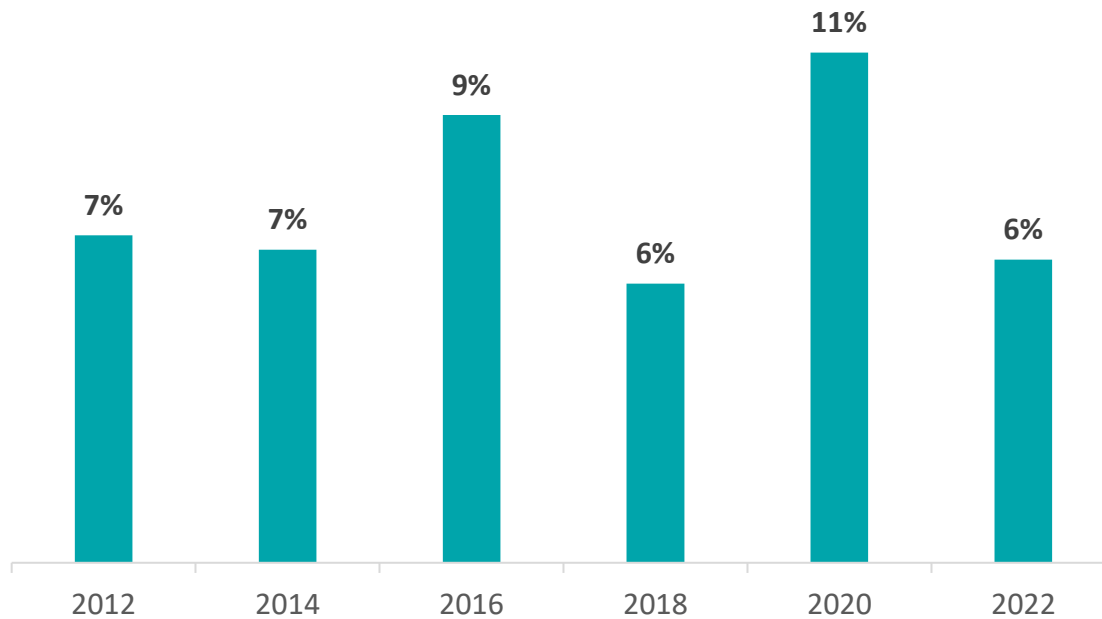
Older adults with a high school education or less are significantly more likely to have no natural teeth compared to adults with a college degree

<sup>1</sup> Because of small sample sizes, LA County data is not available

- Total tooth loss means that the person had no natural teeth (all teeth have been removed). People with no teeth are referred to as edentulous.
- Data Source: Behavioral Risk Factor Surveillance System (BRFSS), 2022, <https://www.cdc.gov/brfss/brfssprevalence/>
- Accessed 06-17-2025

# Total Tooth Loss in Adults 65+ Years - LA County Trends

Percentage of LA County<sup>1</sup> adults aged 65+ years that have had all permanent teeth extracted by year<sup>2</sup>



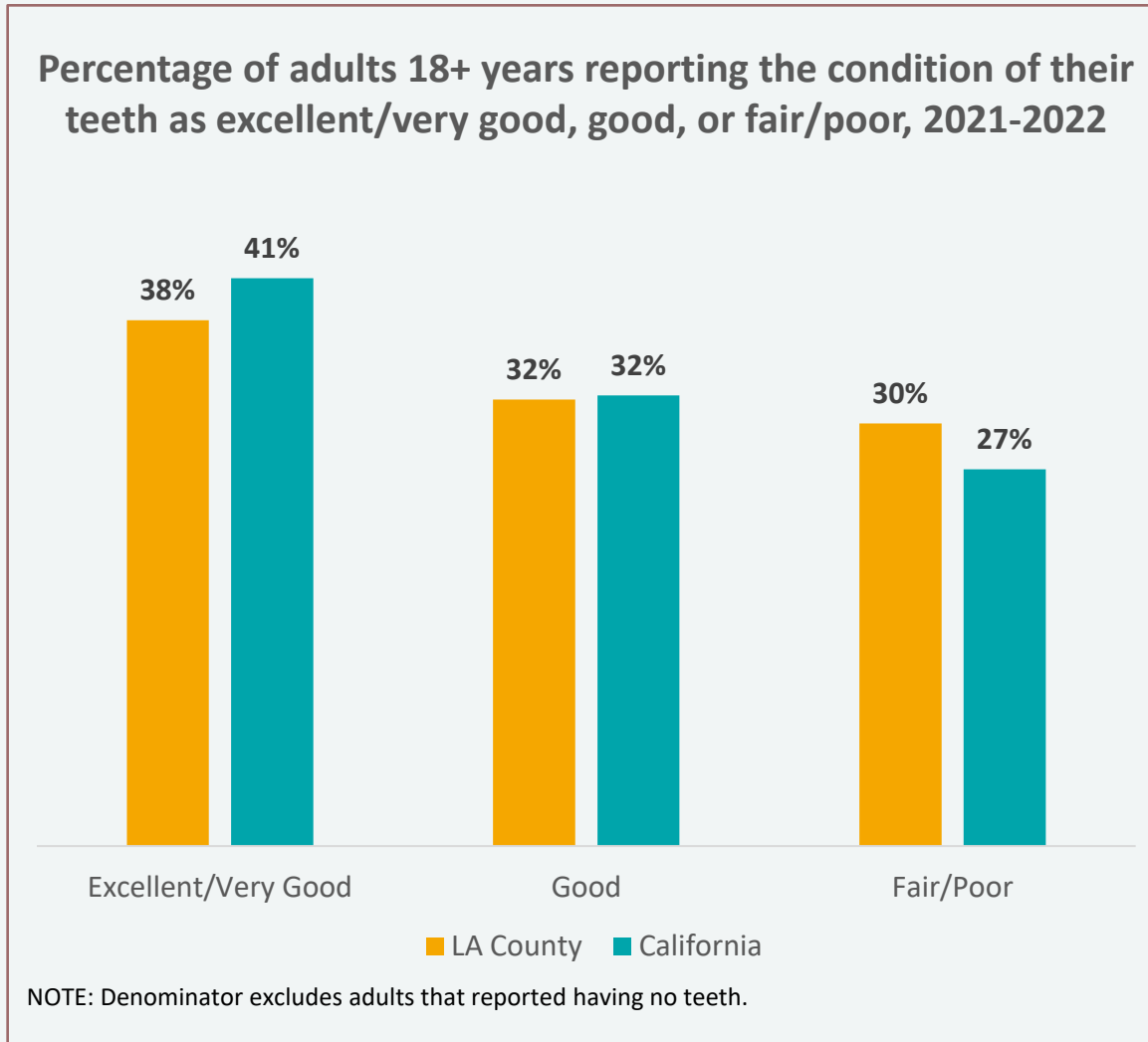
<sup>1</sup> LA County data is from the Los Angeles-Long Beach-Anaheim Metropolitan Statistical Area which includes Los Angeles and Orange Counties

<sup>2</sup> Age adjusted

- Since 2012, the percentage of older adults that have had all their teeth removed has remained stable

- Total tooth loss means that the person has no natural teeth (all teeth have been removed). People with no teeth are referred to as edentulous.
- Data Source: Behavioral Risk Factor Surveillance System (BRFSS), 2012-2022, <https://www.cdc.gov/brfss/brfssprevalence/>
- Accessed 06-17-2025

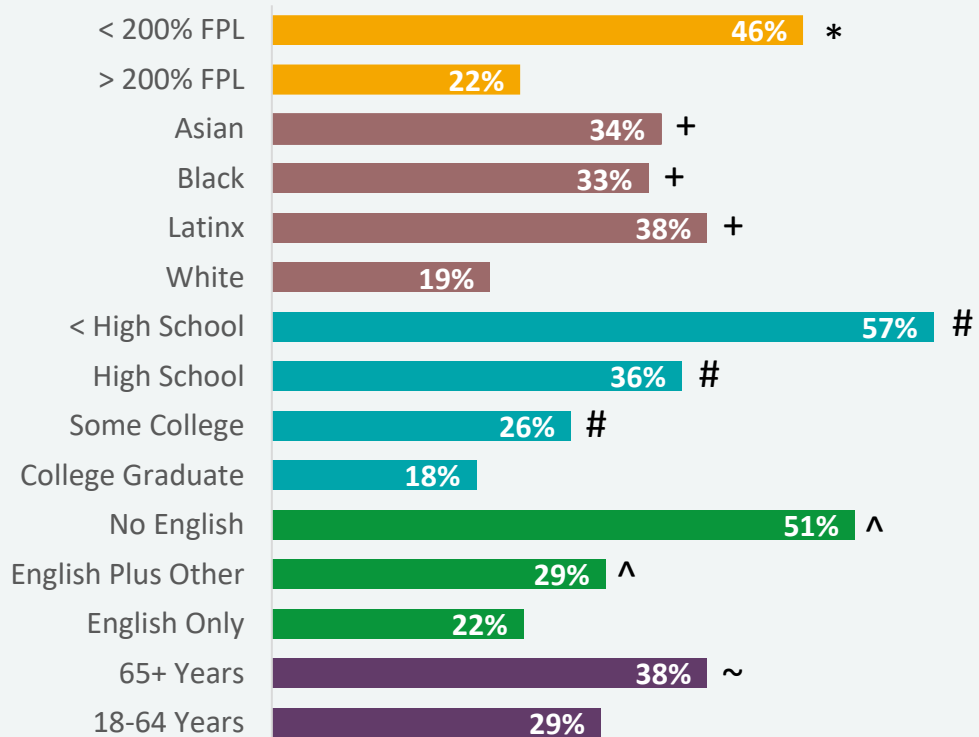
# Self-Reported Condition of Teeth - Overall Prevalence



- More than 1-of-4 adults in California and LA County report the condition of their teeth as fair/poor
- Data for the United States is not available

# Self-Reported Condition of Teeth - LA County Disparities

Percentage of LA County adults aged 18+ years that report fair/poor condition of teeth by select characteristics, 2021-2022



\*Significantly higher than > 200% FPL  
 +Significantly higher than White adults  
 #Significantly higher than college graduates

^Significantly higher than adults that speak only English  
 ~Significantly higher than adults 18-64 years



Lower income adults are significantly more likely to report fair/poor condition of teeth compared to higher income adults



Asian, Black/African American and Latinx adults are significantly more likely to report fair/poor condition of teeth compared to White adults



Adults with less than a college degree are significantly more likely to report fair/poor condition of teeth compared to adults with a college degree



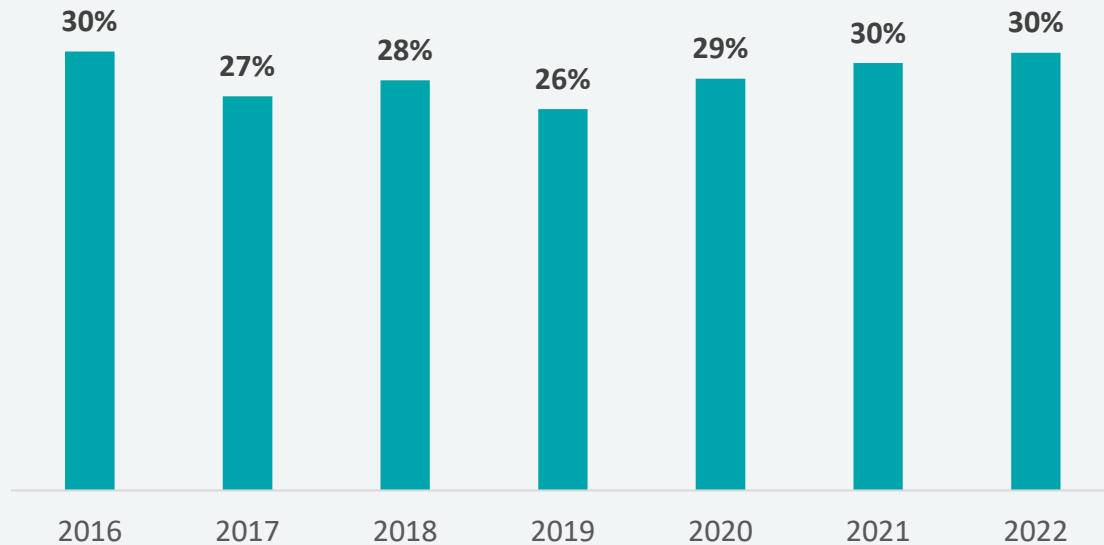
Adults that speak non-English languages at home are significantly more likely to report fair/poor condition of teeth compared to adults that speak only English



Older adults are significantly more likely to report fair/poor condition of teeth compared to younger adults aged 18-64 years

# Self-Reported Condition of Teeth - LA County Trends

Percentage of LA County adults 18+ years that report fair/poor condition of teeth by survey year

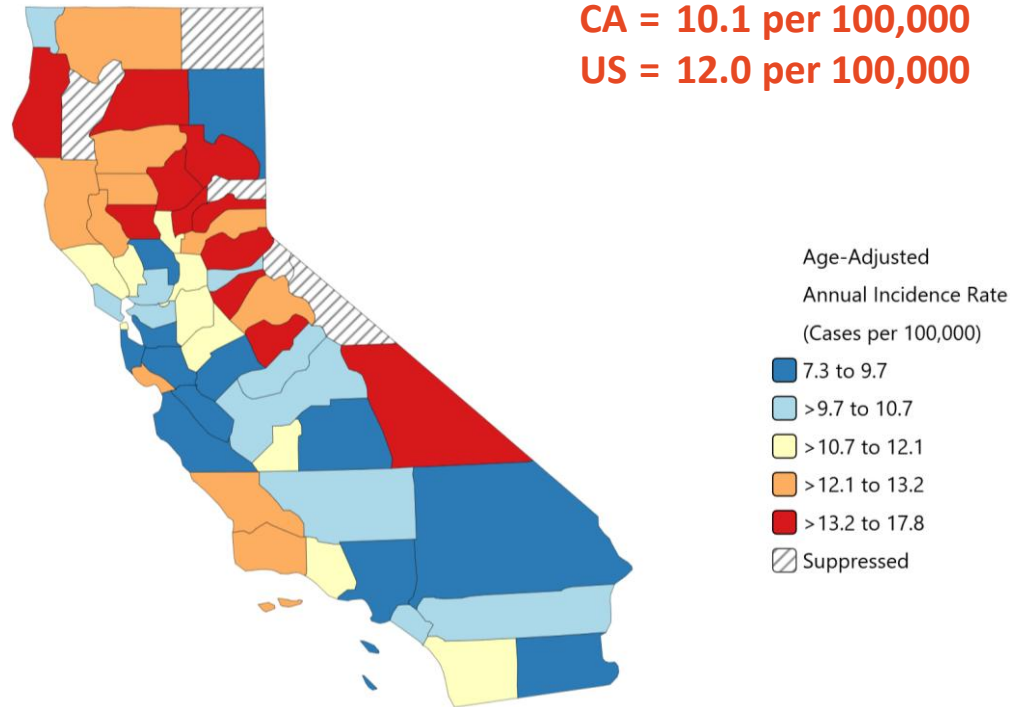


- Since 2016, the percentage of adults that report fair/poor condition of teeth has remained stable

# Oral and Pharyngeal Cancer - Overall Incidence & Disparities

Age-adjusted<sup>1</sup> incidence of oral and pharyngeal cancer in California by county, 2017-2021

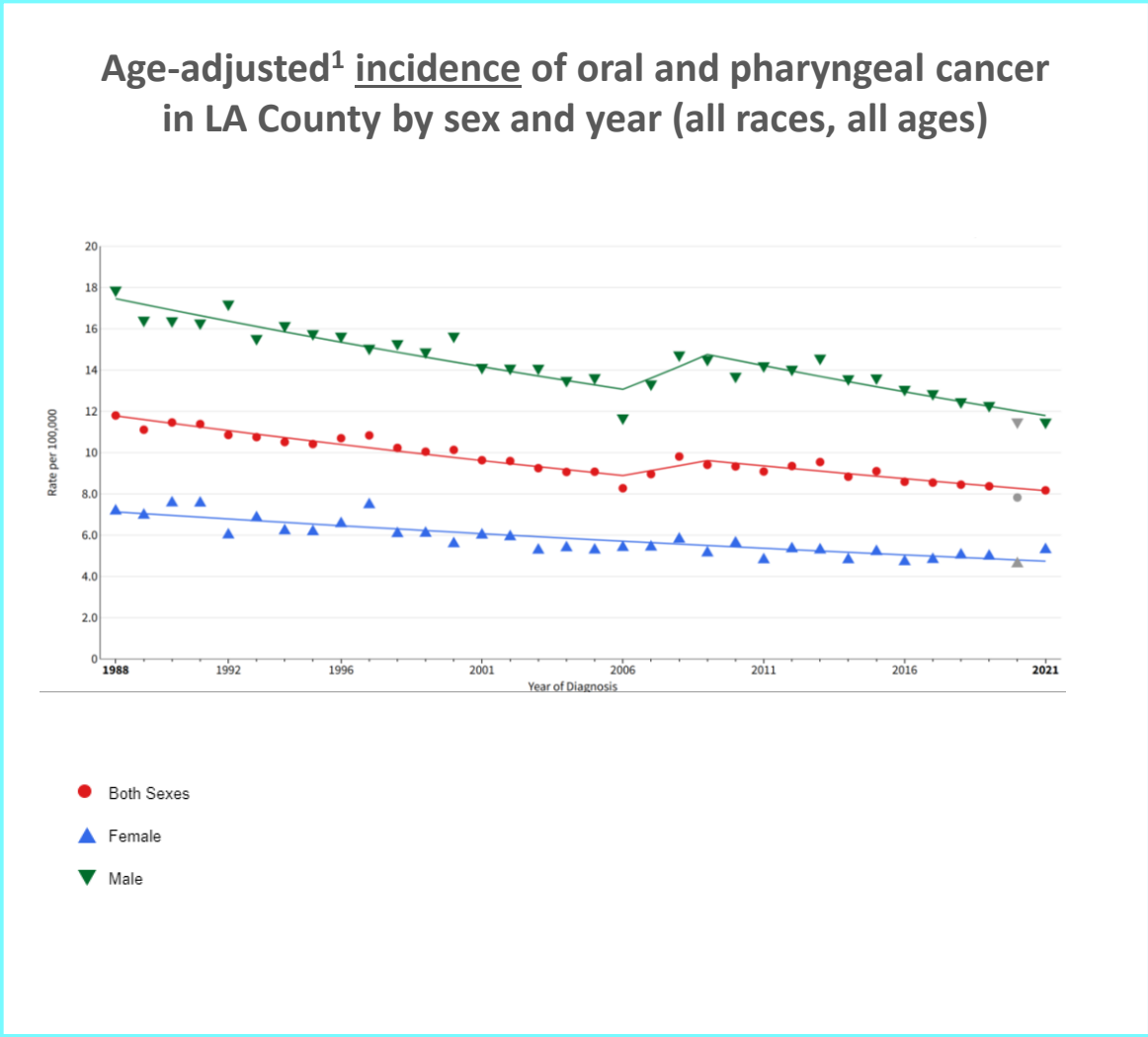
LA = 8.3 per 100,000  
CA = 10.1 per 100,000  
US = 12.0 per 100,000



- The age-adjusted<sup>1</sup> incidence of oral and pharyngeal cancer is lower in Los Angeles County than in California or the US
- LA County disparities, 2021 (per 100,000)
  - Females (all races/all ages) 5.4
  - Males (all races/all ages) 11.4
  - Asian (both sexes/all ages) 6.7
  - Black (both sexes/all ages) 8.5
  - Latinx (both sexes/all ages) 5.5
  - White (both sexes/all ages) 11.2

<sup>1</sup> Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.

# Oral and Pharyngeal Cancer - LA County Trends (Incidence)



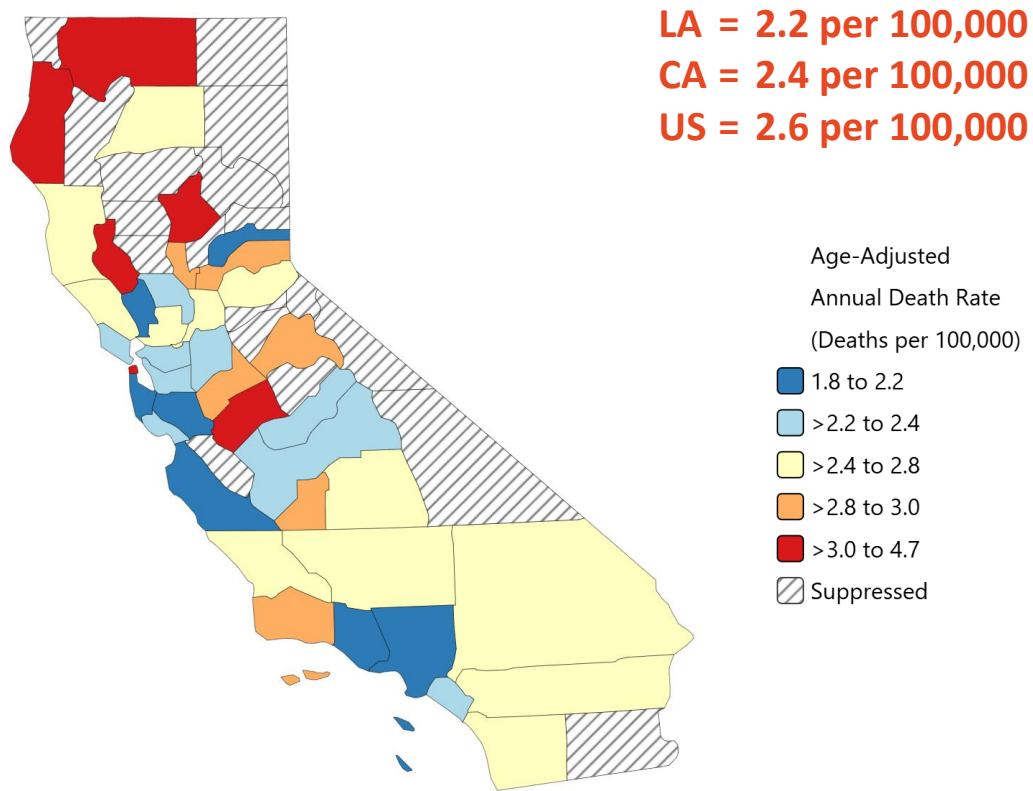
- Females
  - Incidence has been falling since 1988
- Males
  - Incidence has been falling since 2009

Sex	Annual Percent Change – LA County			
	Year Range	Estimate (%)	P-Value	Direction
Female	1988-2021	-1.2	<0.01	Falling
	2009-2021	NA	NA	NA
Male	1988-2006	-1.6	<0.01	Falling
	2006-2009	4.1	<0.01	Rising
	2009-2021	-1.8	<0.01	Falling

<sup>1</sup> Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.

# Oral and Pharyngeal Cancer - Mortality & Disparities

Age-adjusted<sup>1</sup> death rate from oral and pharyngeal cancer in California by county, 2018-2022

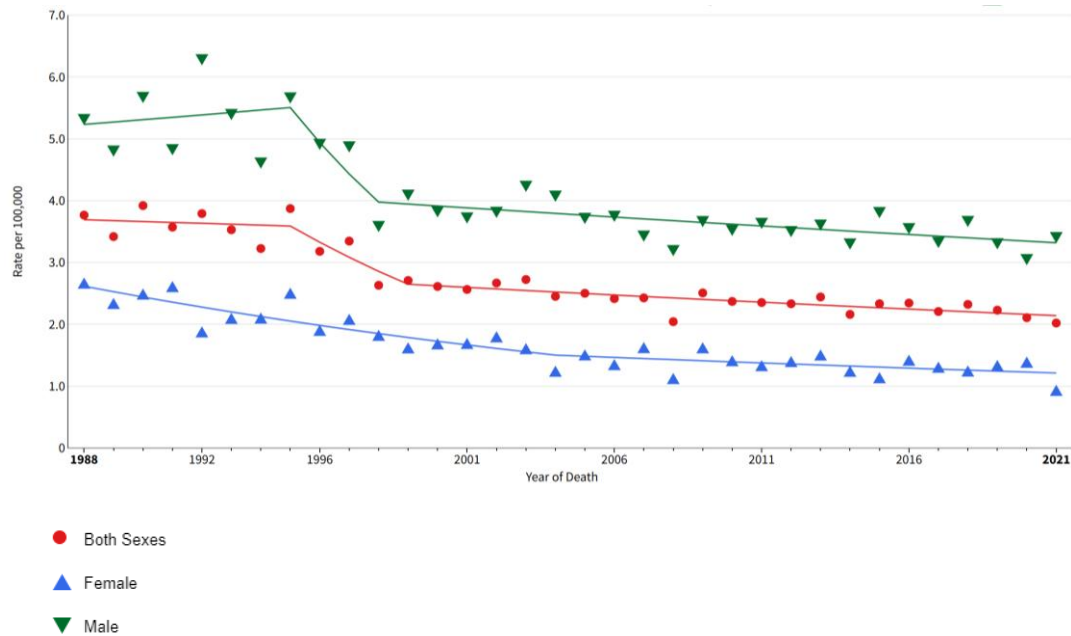


- The age-adjusted<sup>1</sup> death rate from oral and pharyngeal cancer in Los Angeles County is similar to California and the US
- LA County disparities, 2021 (per 100,000)
  - Females (all races/all ages) 0.9
  - Males (all races/all ages) 3.4
  - Asian (both sexes/all ages) 1.8
  - Black (both sexes/all ages) 3.5
  - Latinx (both sexes/all ages) 1.4
  - White (both sexes/all ages) 2.4

<sup>1</sup> Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.

# Oral and Pharyngeal Cancer - LA County Trends (Mortality)

Age-adjusted<sup>1</sup> death rates from oral and pharyngeal cancer in LA County by sex and year (all races, all ages)



- Death rates are falling for males and are stable for females

Sex	Annual Percent Change – LA County			
	Year Range	Estimate (%)	P-Value	Direction
Female	1988-2004	-3.4	<0.01	Falling
	2004-2021	-1.3	>0.05	Stable
Male	1995-1998	-10.3	<0.01	Falling
	1998-2021	-0.8	<0.01	Falling

<sup>1</sup> Age-adjustment is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared.



# Use of the Dental Care Delivery System

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**Children 1-11 Years**  
**Adults 18+ Years**  
**Adults 18+ Years with Diabetes**  
**Medicaid (Medi-Cal) Enrollees**

# USE OF THE DENTAL CARE DELIVERY SYSTEM

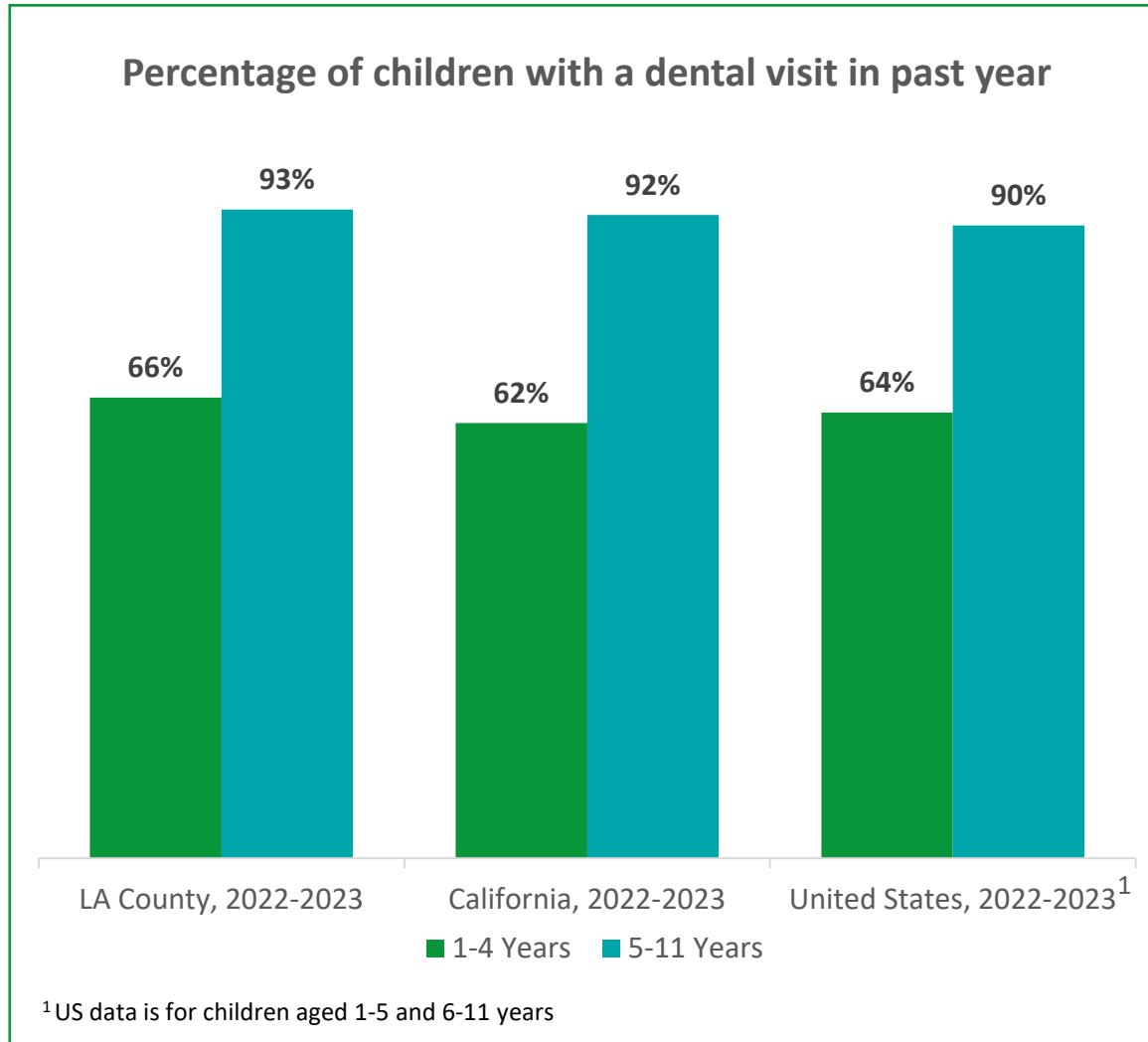
## DATA-AT-A-GLANCE

Indicator/Population Group	LA County	California	United States
<b>Dental visit in past year (self-report)</b>	Percentage (Year)	Percentage (Year)	Percentage (Year)
Children 1-4 years	66% (2022-2023)	62% (2022-2023)	64% (2022-2023)^
Children 5-11 years	93% (2022-2023)	92% (2022-2023)	90% (2022-2023)^
Adolescents 12-17 years*	86% (2022-2023)	87% (2022-2023)	89% (2022-2023)
Adults 18+ Years	67% (2022-2023)	69% (2022-2023)	66% (2022)
Adults 18+ years with diabetes	63% (2022-2023)	64% (2022-2023)	60% (2022)
<b>Dental visit during pregnancy (self-report)</b>			
Pregnant women	37% (2020-2021)	40% (2020-2021)	Not Available
<b>Dental visit during calendar/fiscal year (claims data)</b>			
Medicaid enrollees 0-20 years	50% (CY2022)	47% (CY2022)	46% (FY2023)
Medicaid enrollees 21+ years	25% (CY2022)	21% (CY2022)	Not Available
<b>Used free community or public dental programs</b>			
Children 1-4 years	17% (2022-2023)	14% (2022-2023)	Not Available
Children 5-11 years	21% (2022-2023)	16% (2022-2023)	Not Available

\* LA County and California data was obtained from the adolescent while US data was obtained from the parent

^ US data is for children 1-5 years and children 6-11 years

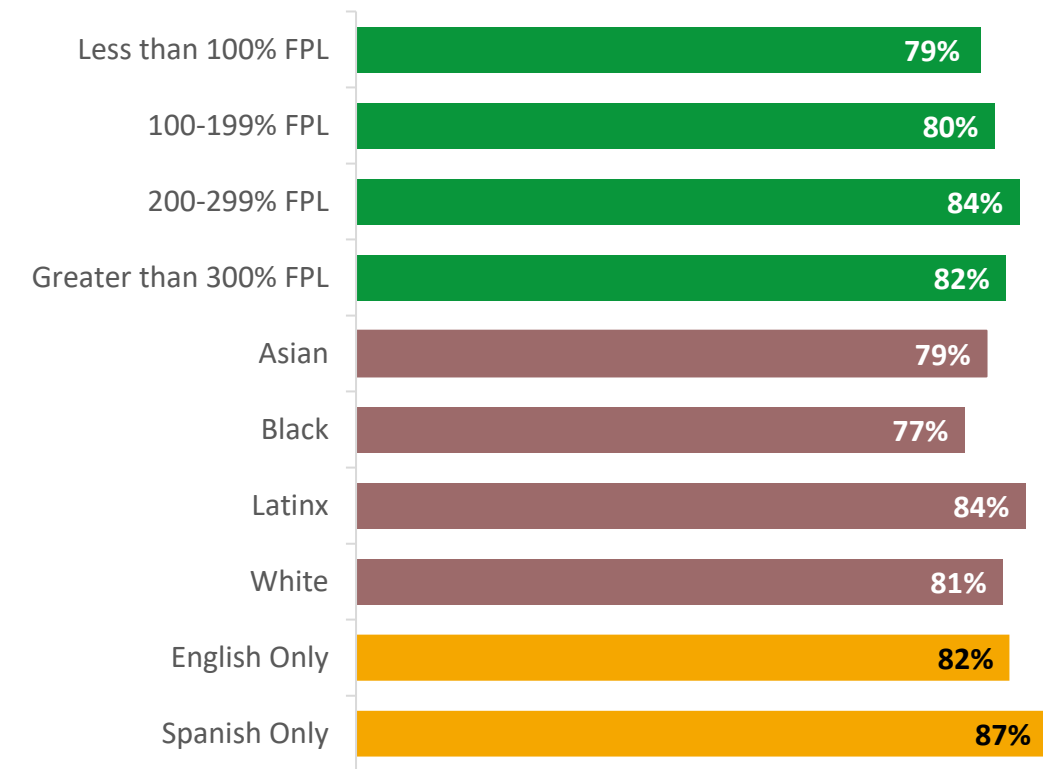
# Dental Visit in Past Year Among Children - Overall Prevalence



- The percentage of children with a dental visit in the past year is similar for LA County, California and the US
- Most parents report that their child aged 5-11 years had a dental visit in the past year

# Dental Visit in Past Year Among Children - California<sup>1</sup> Disparities

Percentage of California<sup>1</sup> children 1-11 years with a dental visit by income, race/ethnicity, and language spoken at home, 2022-2023



FPL = Federal poverty level

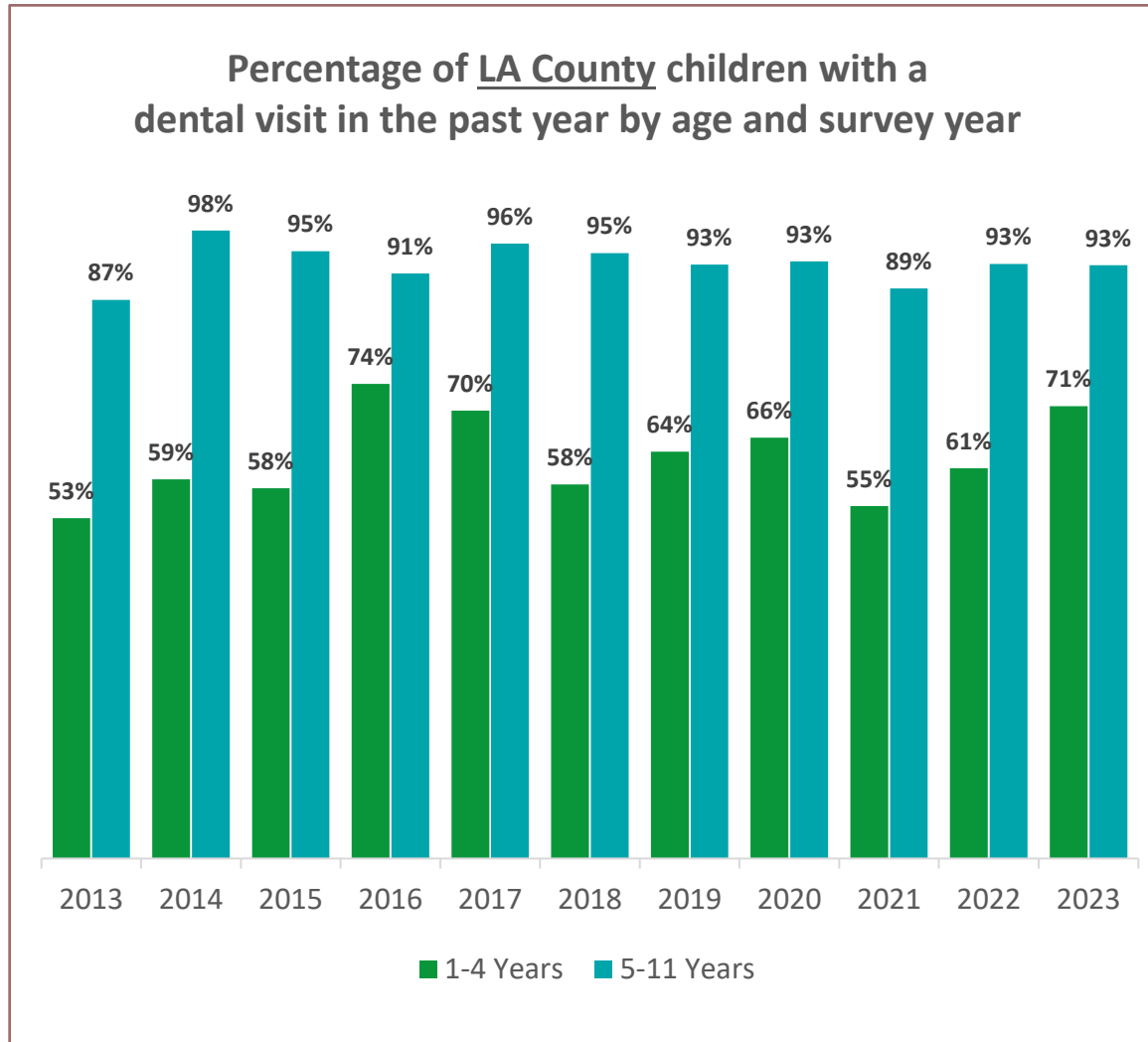


In California, the percentage of children with a dental visit in the past year does not vary by income, race/ethnicity, or language spoken at home

• Data Source: California Health Interview Survey (CHIS), 2022-2023 pooled, <https://ask.chis.ucla.edu/>  
• CHIS question: asked of all children 3-11 years of age and children under 3 years of age with teeth  
• Accessed 06-17-2025

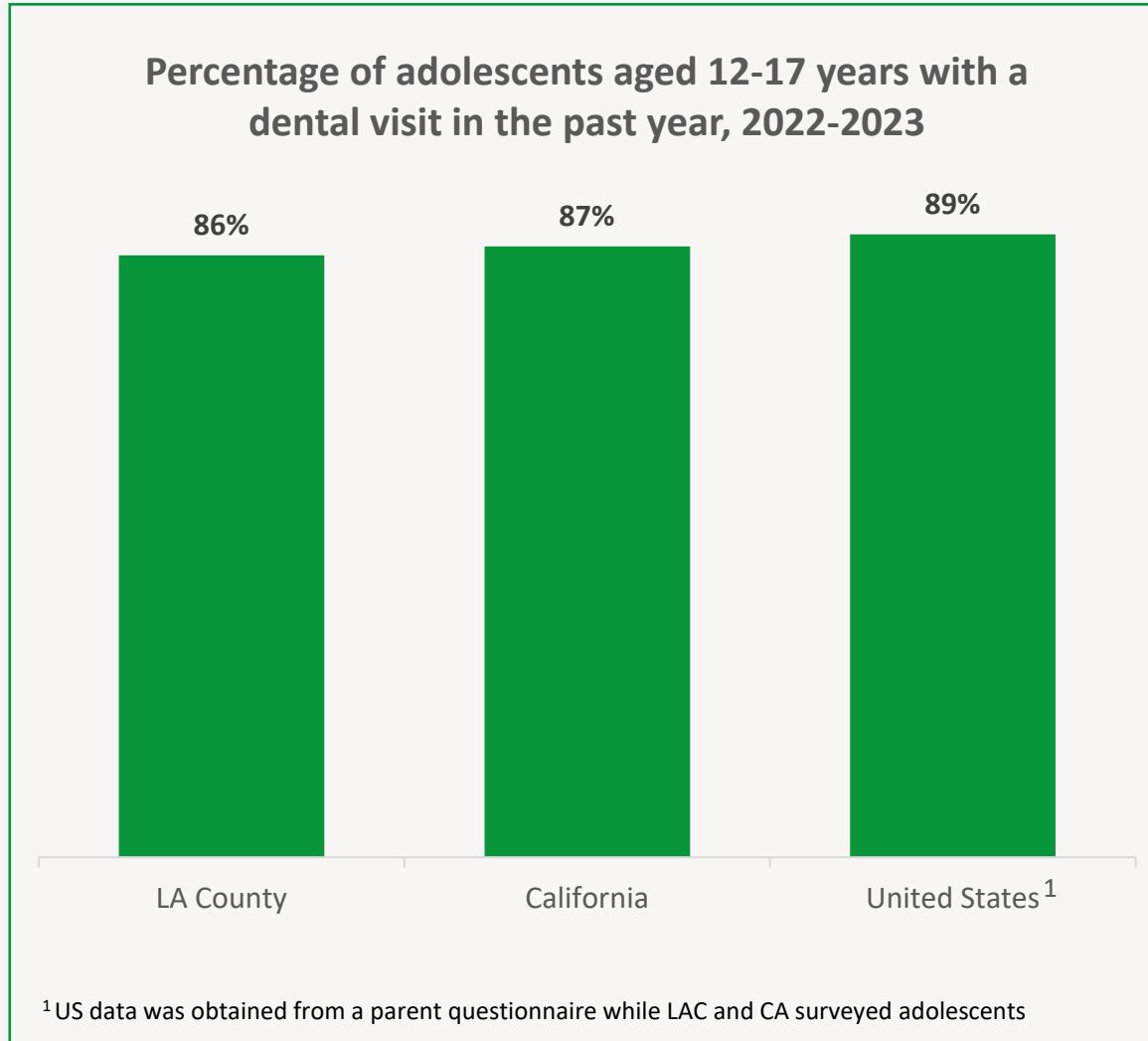
<sup>1</sup> Because of small sample sizes, LA County data is not available

# Dental Visit in Past Year Among Children - LA County Trends



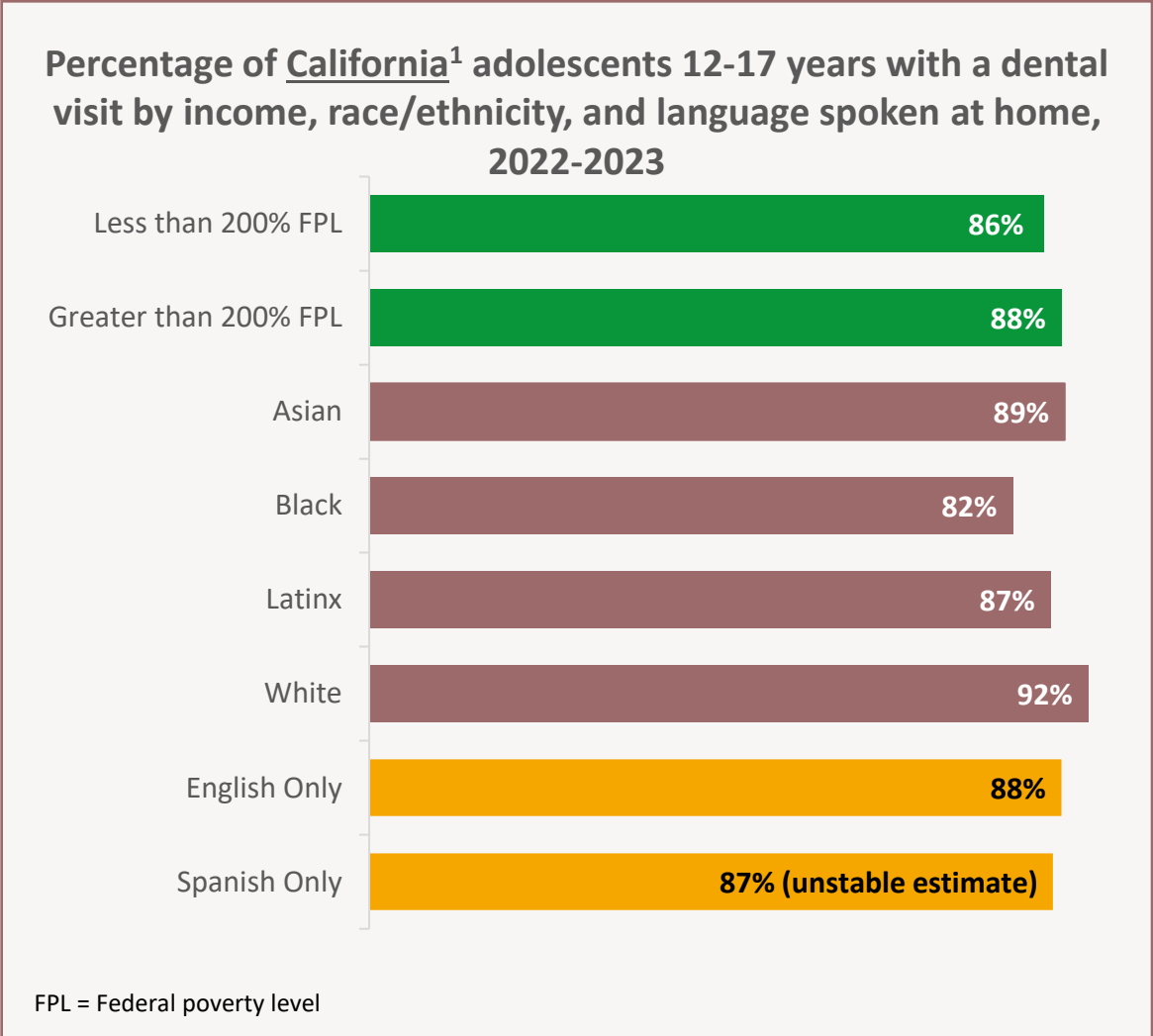
- The percentage of children with a dental visit in the past year has not changed significantly since 2013

# Dental Visit in Past Year Among Adolescents - Overall Prevalence



- Almost all adolescents in LA County and California report a dental visit in the last year
  - **IMPORTANT NOTE:** US data is from the National Survey of Children's Health which asks *parents* about last dental visit. LA County and California data is from the California Health Interview Survey which asks the *adolescent* about time since last dental visit.

# Dental Visit in Past Year Among Adolescents - California<sup>1</sup> Disparities

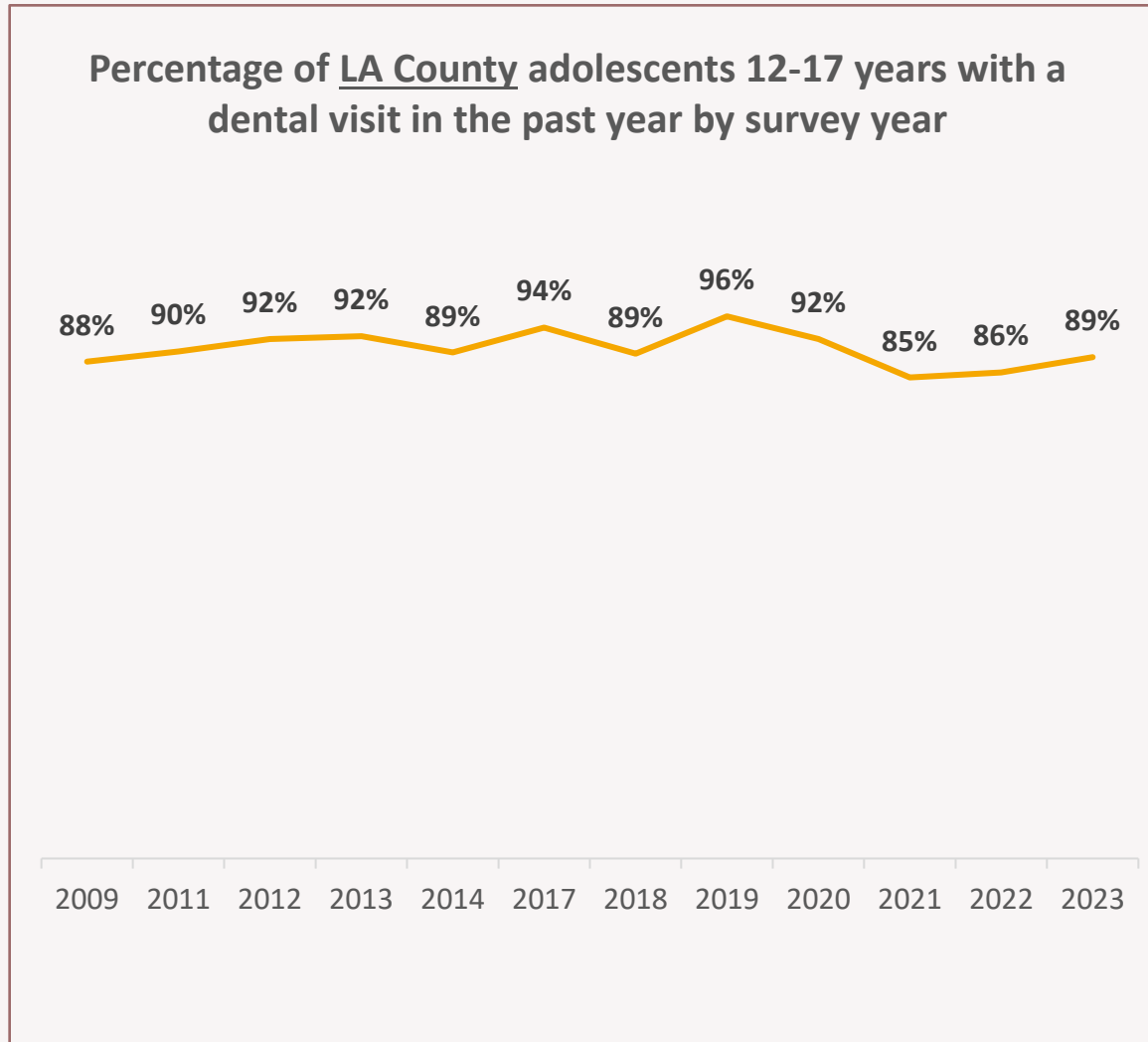


In California, the percentage of adolescents with a dental visit in the past year does not vary by income, race/ethnicity, or language spoken at home

- Data Source: California Health Interview Survey (CHIS), 2022-2023 pooled, <https://ask.chis.ucla.edu/>
- CHIS question: asked of all children 3-11 years of age and children under 3 years of age with teeth
- Accessed 06-18-2025

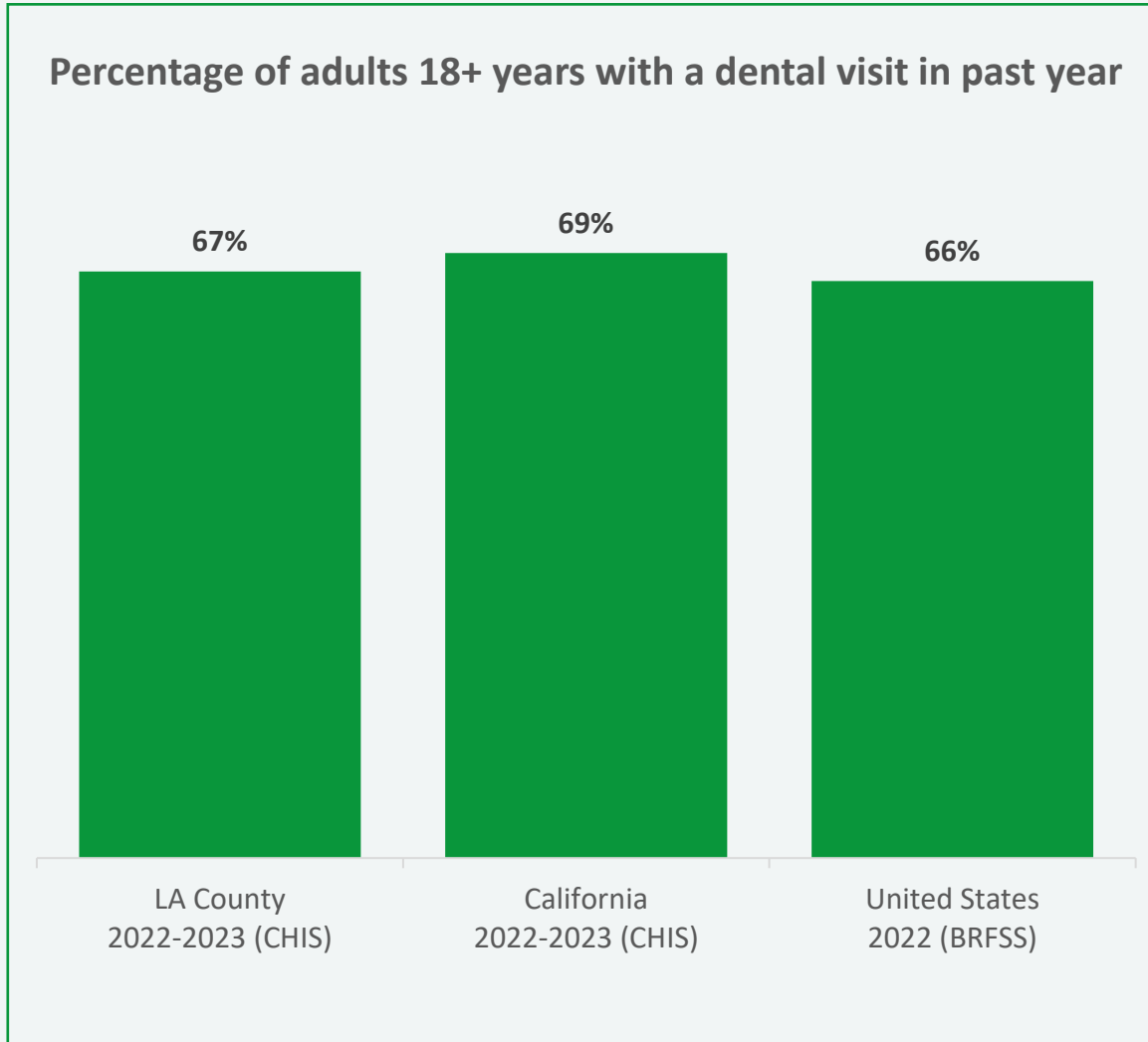
<sup>1</sup> Because of small sample sizes, LA County data is not available

# Dental Visit in Past Year Among Adolescents - LA County Trends



- In 2009, 88% of adolescents reported a dental visit in the last year compared to 96% in 2019
- In 2021, the percentage reporting a dental visit in the last year dropped to 85% - this may have been due to issues associated with accessing dental care during COVID-19

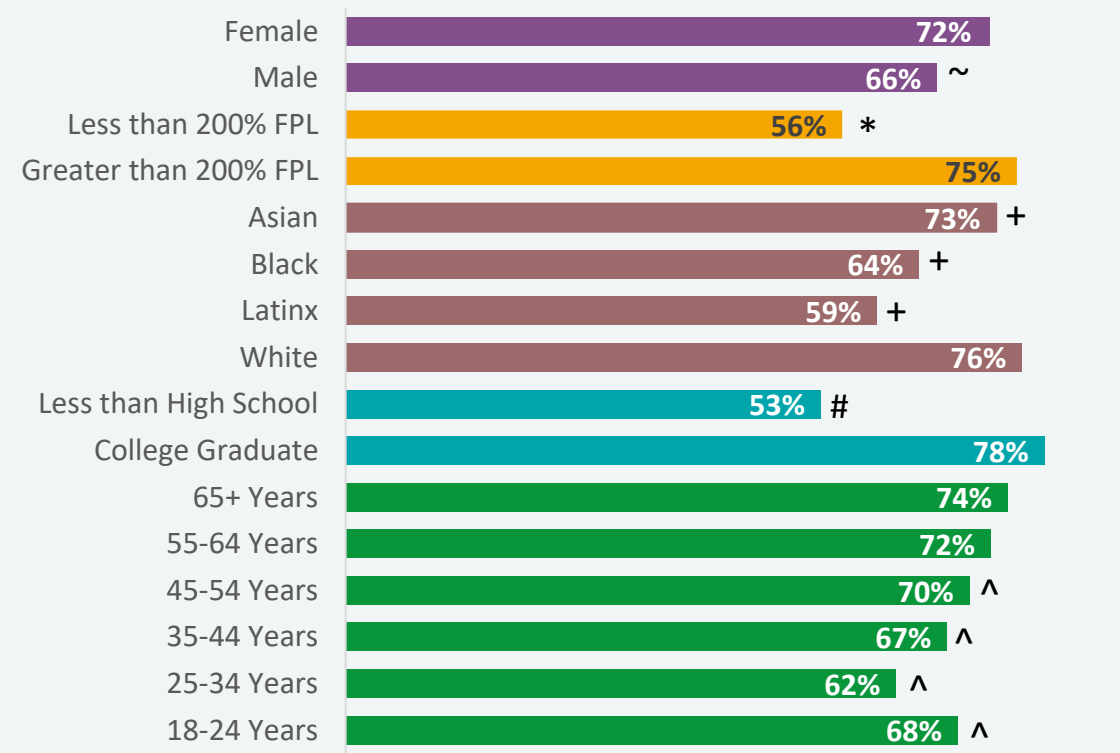
# Dental Visit in Past Year Among Adults - Overall Prevalence



- The percentage of LA County adults with a dental visit in the last year is similar to the percentage of adults in California and the US
- Among LA County adults, the primary reason for their last dental visit was...
  - Routine checkup or cleaning: 69%
  - Specific problem: 16%
  - Both: 15%

# Dental Visit in Past Year Among Adults - California<sup>1</sup> Disparities

Percentage of California<sup>1</sup> adults aged 18+ years with a dental visit by sex, income, race/ethnicity, education, and age, 2022-2023



~Significantly lower than females  
\*Significantly lower prevalence than ≥ 200% FPL  
+Significantly lower prevalence than White adults  
#Significantly lower prevalence than college graduates  
^Significantly lower prevalence than adults 65+ years



Lower income adults are significantly less likely to have an annual dental visit compared to higher income adults



Asian, Black/African American and Latino/Latinx adults are significantly less likely to have an annual dental visit compared to Whites



Adults with less than a high school education are significantly less likely to have an annual dental visit compared to adults with a college degree

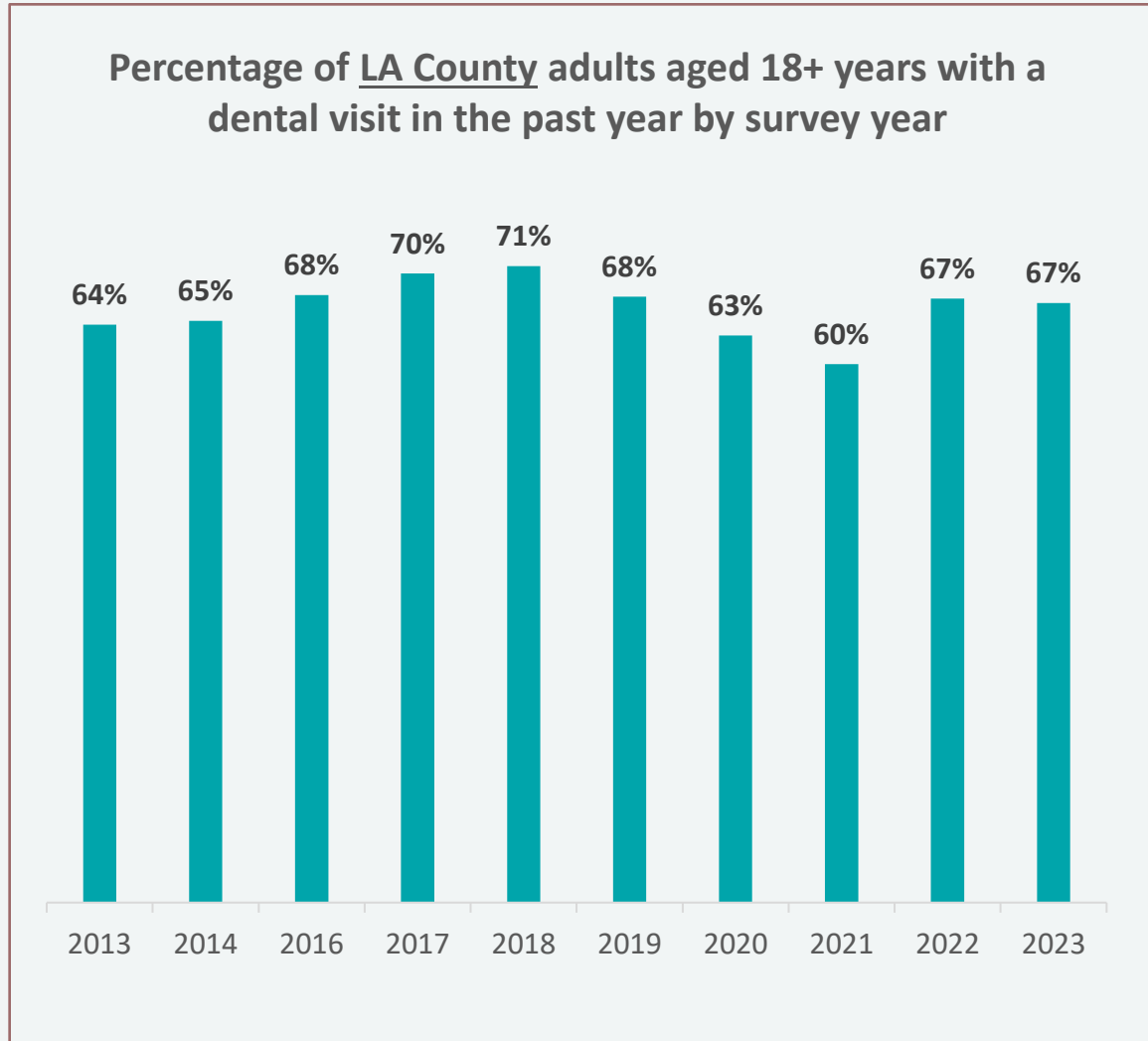


Adults less than 54 years are significantly less likely to have an annual dental visit compared to adults 65+ years

• Data Source: California Health Interview Survey (CHIS), 2022-2023 pooled, <https://ask.chis.ucla.edu/>  
• Accessed 06-18-2025

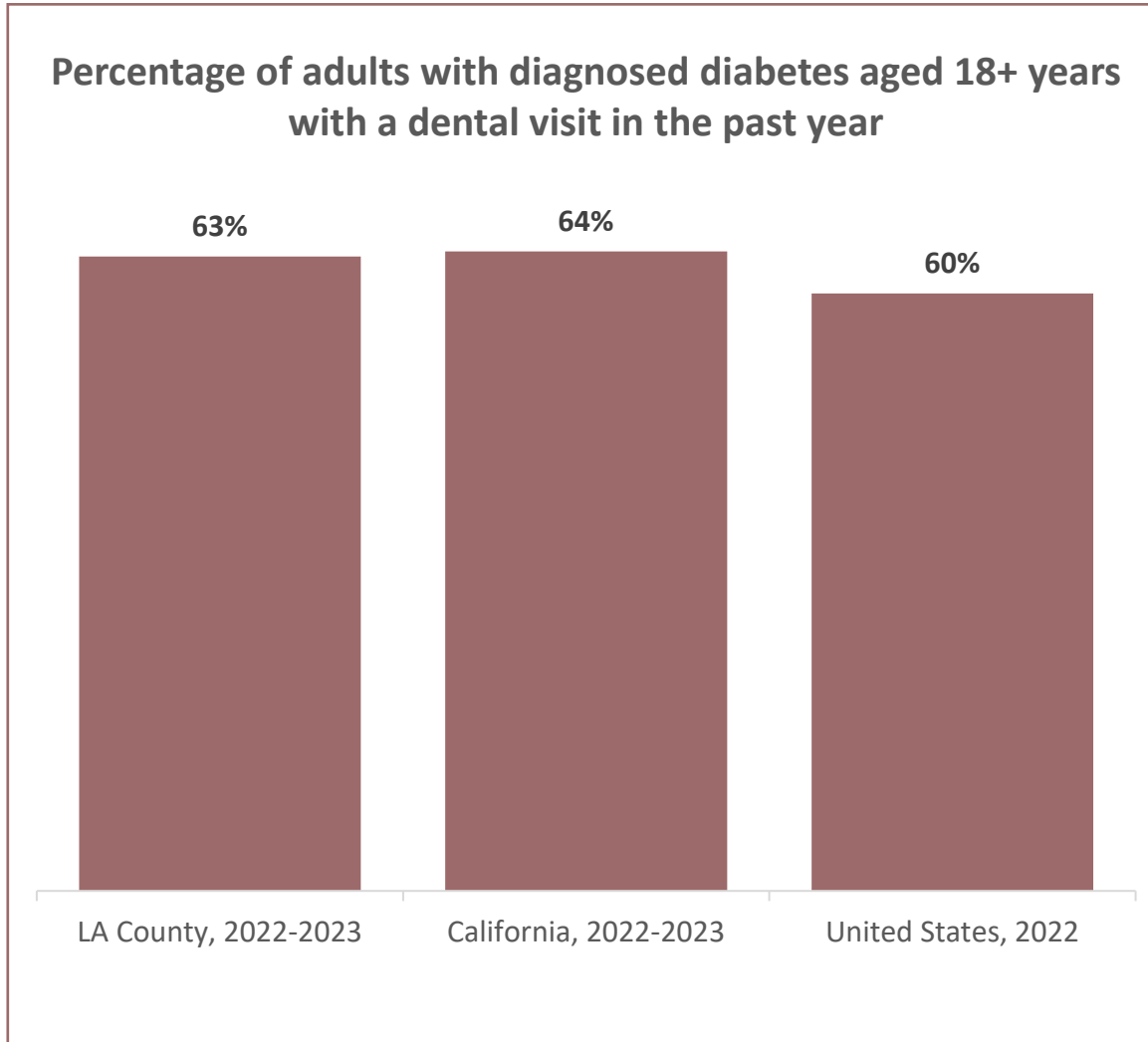
<sup>1</sup> Because of small sample sizes, LA County data is not available

# Dental Visit in Past Year Among Adults - LA County Trends



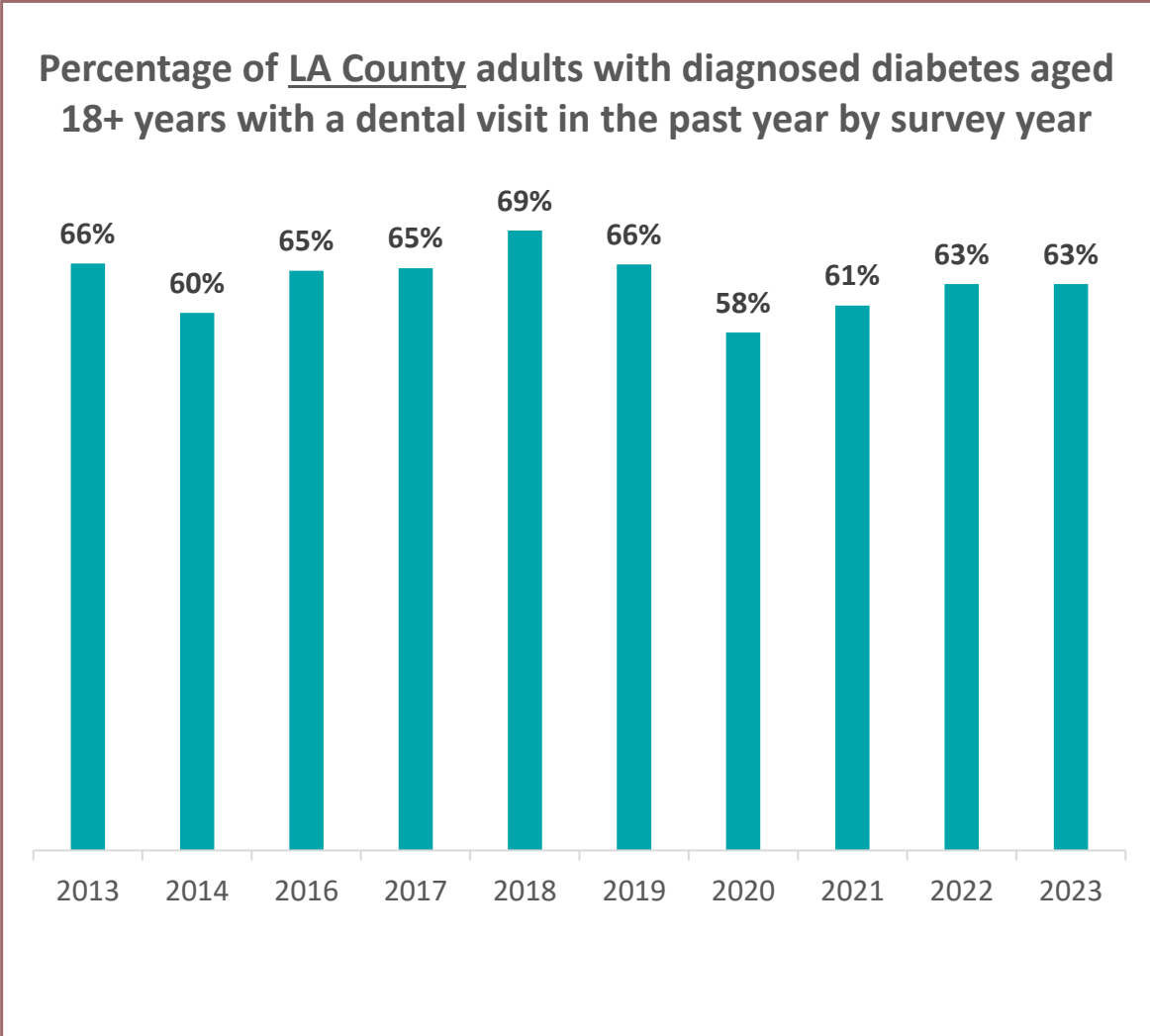
- Approximately 2 out of 3 adults in LA County had a dental visit in the past year
- From 2018 to 2021, there was a steady decline in the percentage of adults with a dental visit in the past year. This may have been the result of limited access to dental care during COVID.
- Post-COVID, the percentage of LA County adults with a dental visit increased to 67%.

# Dental Visit in Past Year Among Adults with Diabetes



- The percentage of adults with diabetes aged 18+ years with a dental visit in the past year is similar for LA County, California and the US
- Information on disparities is not presented because estimates are statistically unstable

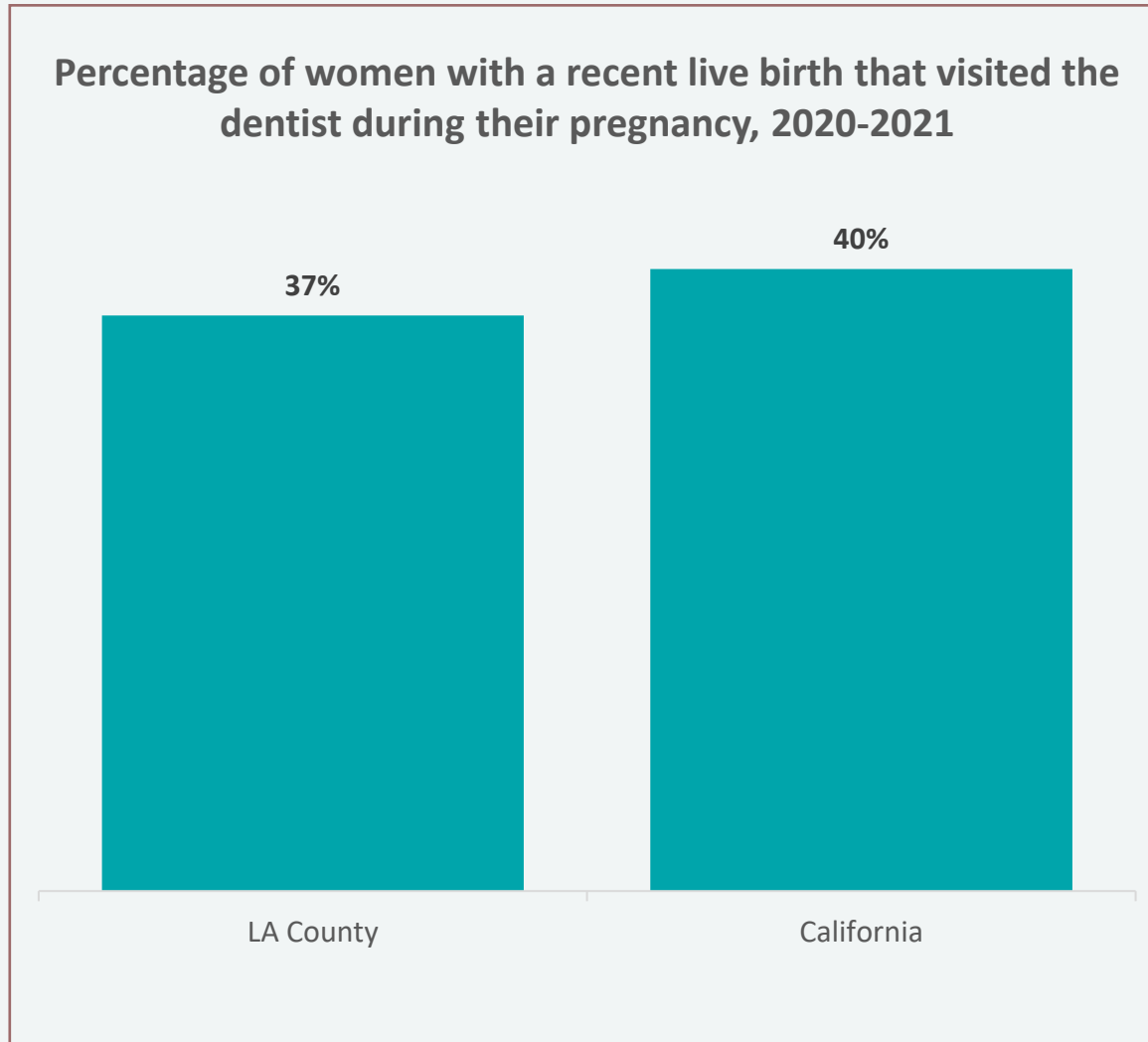
# Dental Visit in Past Year Among Adults with Diabetes - LA County Trends



- About 2-of-3 LA County adults with diabetes report having a dental visit in the past year

• Data Source: California Health Interview Survey, 2013-2023, <https://ask.chis.ucla.edu/>  
• Accessed 06-18-2025

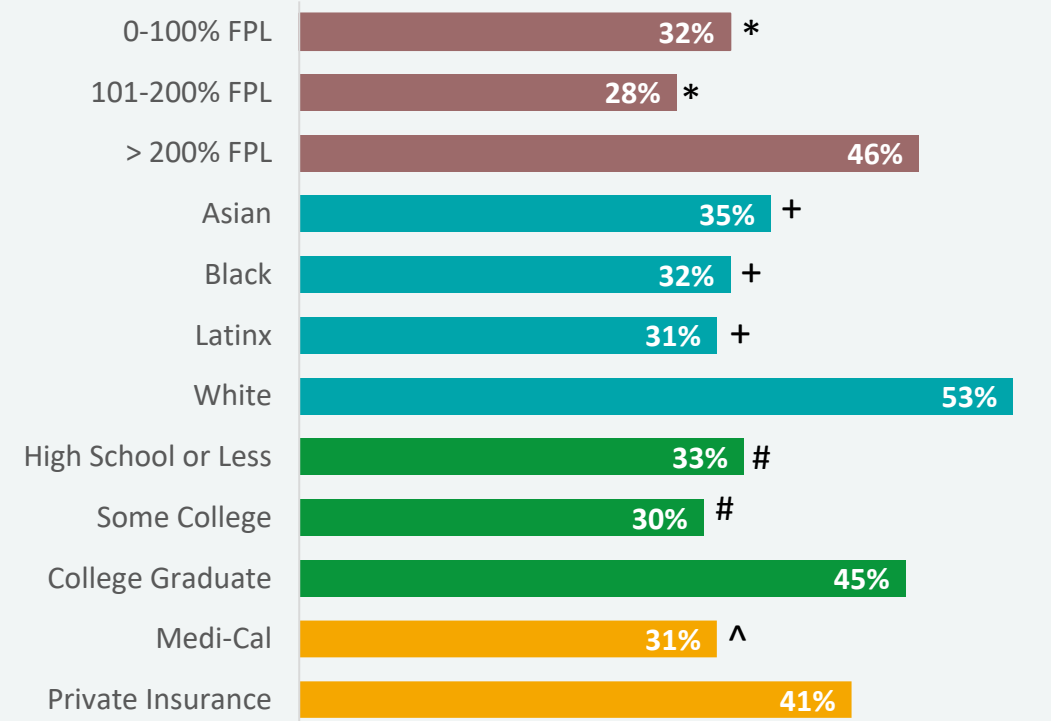
# Dental Visit Among Pregnant Women - Prevalence



- The percentage of women with a dental visit during pregnancy is slightly lower in LA County when compared to California
  - NOTE: Data for the US is not available

# Dental Visit Among Pregnant Women - LA County Disparities

Percentage of pregnant women in LA County with a dental visit by income, race/ethnicity, education, and insurance, 2020-2021



\*Significantly lower prevalence than > 200% FPL  
+Significantly lower prevalence than White women  
#Significantly lower prevalence than college graduates  
^Significantly lower prevalence than women with private insurance  
FPL=Federal poverty level



Lower income women are significantly less likely to have a dental visit during pregnancy compared to higher income women



Black/African American, Latina/Latinx, and Asian American women are significantly less likely to have a dental visit during pregnancy compared to Whites



Women with less than a college degree are significantly less likely to have a dental visit during pregnancy compared to women with a college degree

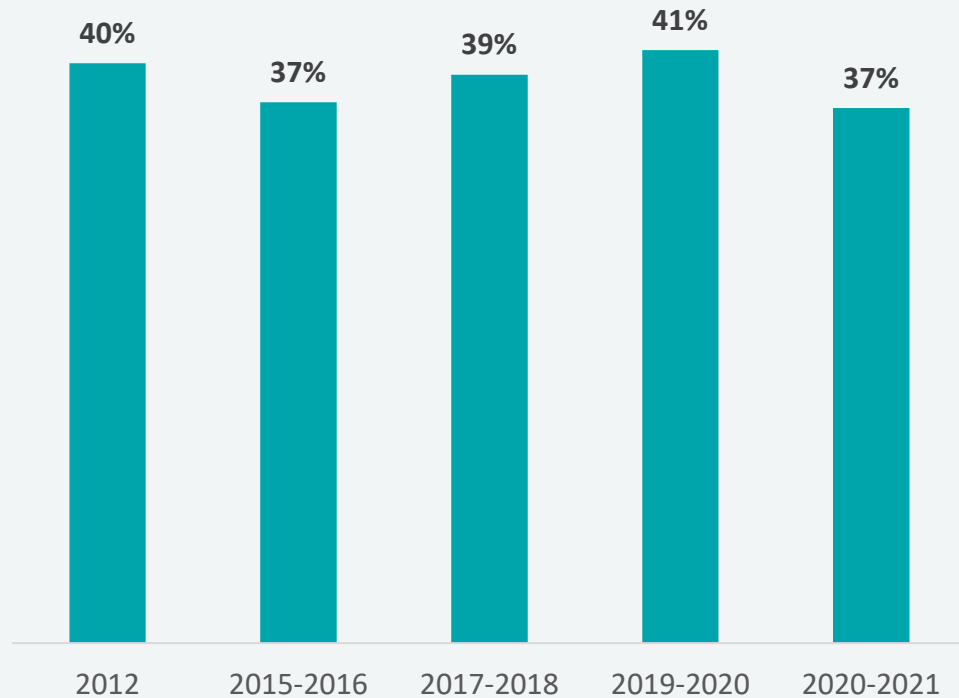


Women with Medi-Cal are significantly less likely to have a dental visit during pregnancy compared to those with private insurance

• Data Source: California Maternal and Infant Health Assessment, 2020-2021. Analysis obtained from California Department of Public Health, Office of Oral Health.

# Dental Visit Among Pregnant Women - LA County Trends

Percentage of LA County women with a recent live birth that visited the dentist during their pregnancy



- The percentage of LA County women with a dental visit during their pregnancy has not changed since 2012

# Dental Visit Among Pregnant Women - Barriers to Care

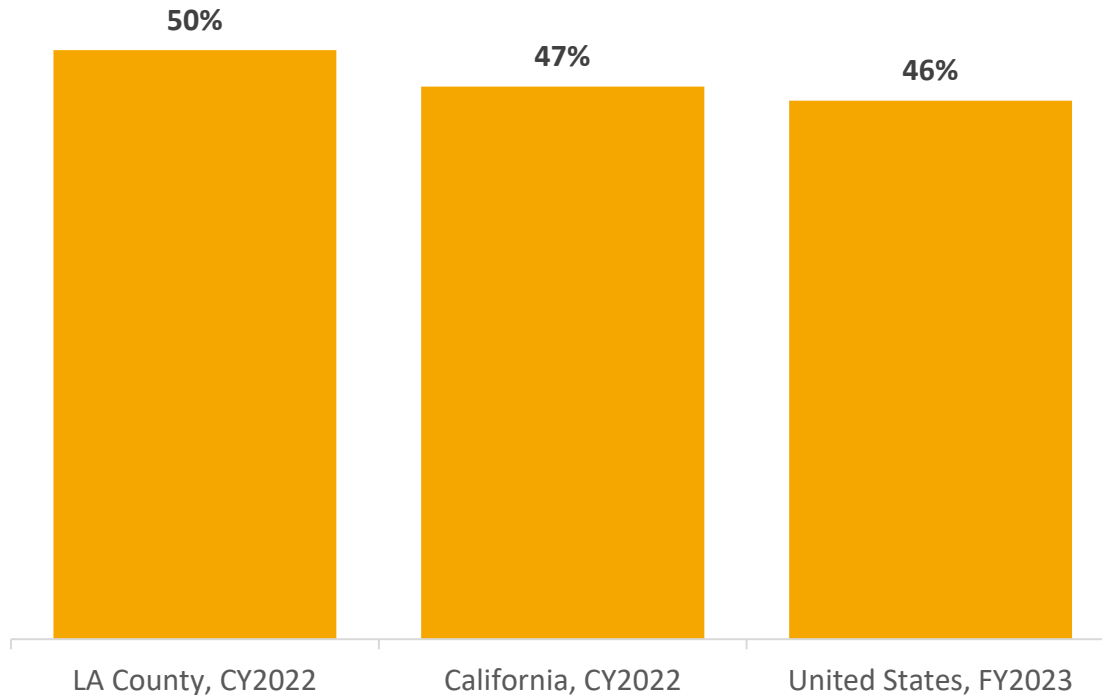
Reasons why LA County women with a recent live birth did not visit a dentist during pregnancy, 2019



- Data Source: California Maternal and Infant Health Assessment, 2019. Analysis obtained from California Department of Public Health, Office of Oral Health.
- NOTE: Women could select multiple reasons, therefore, the total exceeds 100%

# Dental Visit in Year Among Medicaid Children - Prevalence

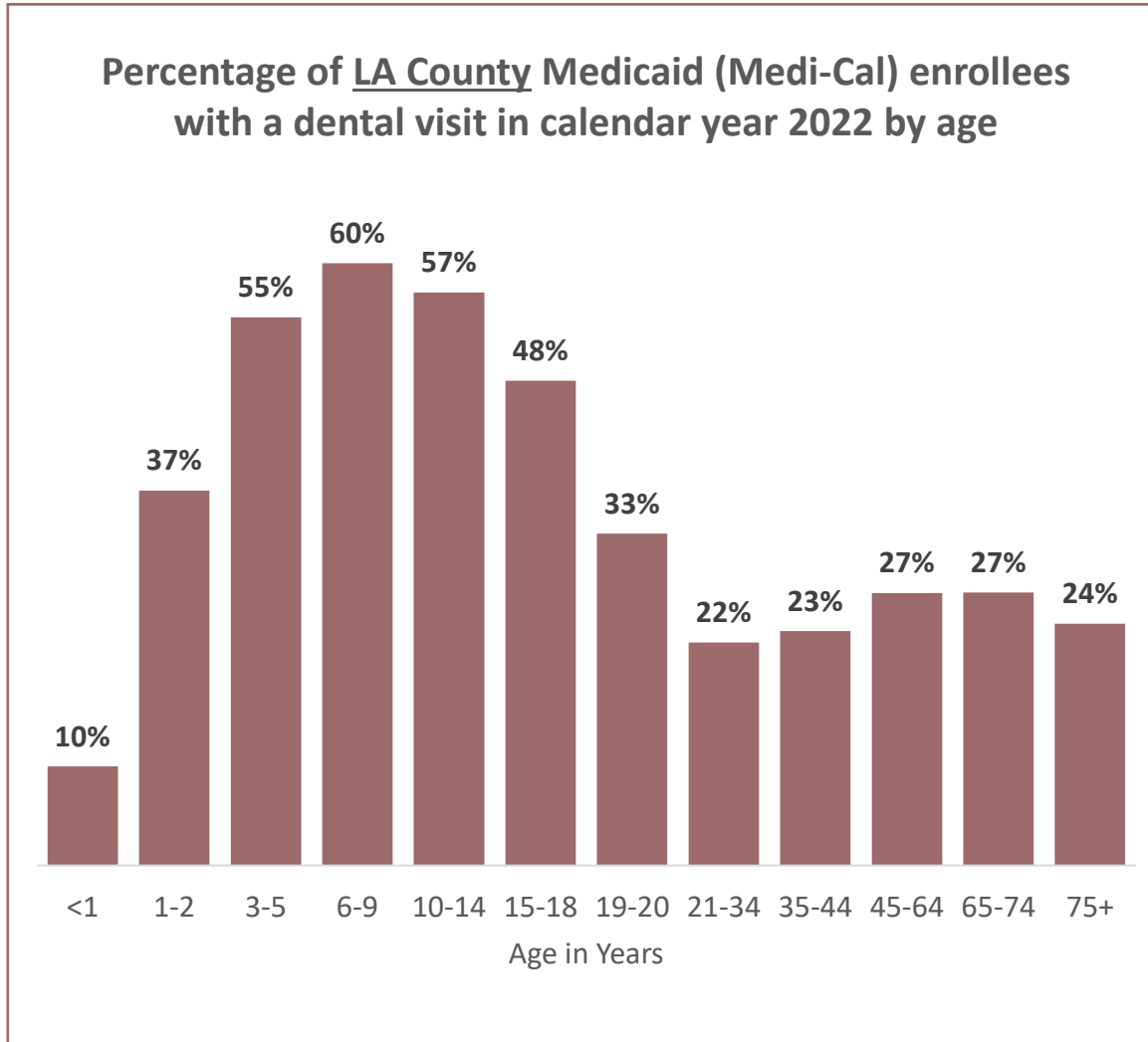
Percentage of Medicaid (Medi-Cal) enrollees aged 0-20 years with a dental visit in the calendar/fiscal year\*



\*Denominator=Number enrolled for 90 continuous days  
FY=Fiscal Year, CY=Calendar Year

- The percentage of children aged 0-20 years enrolled in Medicaid with a dental visit in the calendar/fiscal year is similar for LA County, California, and the US

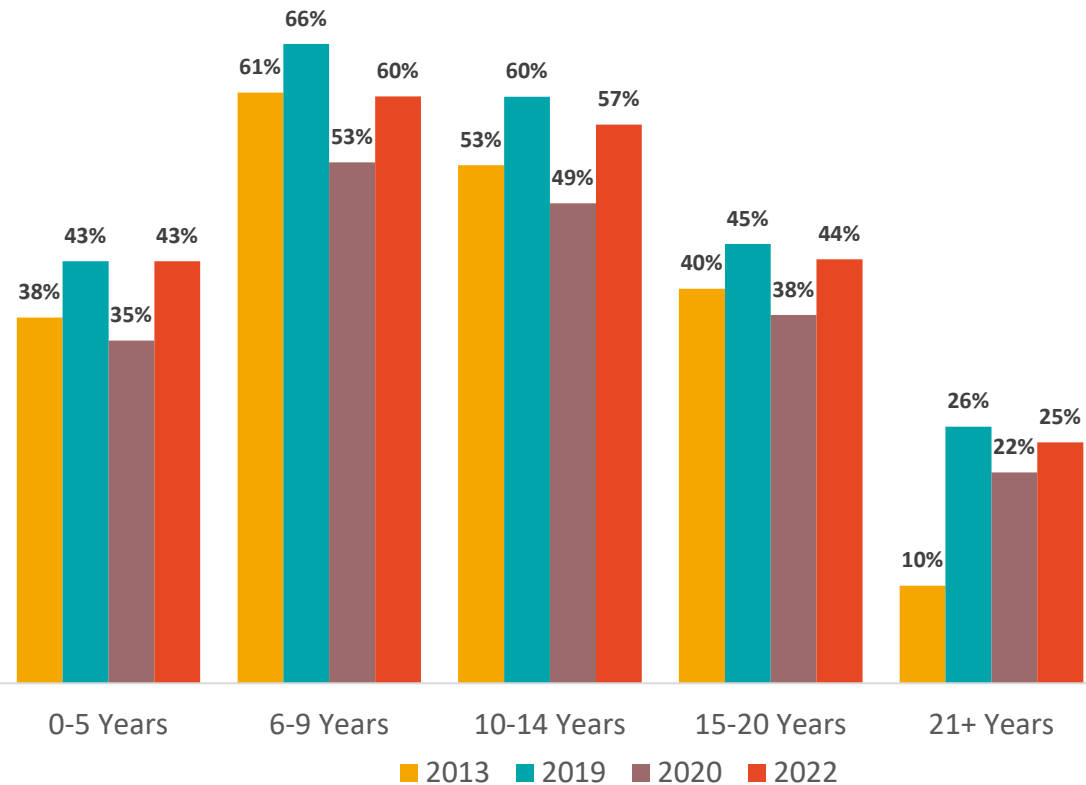
# Dental Visit in Year Among Medicaid Enrollees - Prevalence



- The percentage of Medi-Cal enrollees with a dental visit is highest among children 6-9 years of age
- For Medi-Cal adults, fewer than 3 out of 10 had a dental visit in 2022

# Dental Visit Among Medicaid Enrollees - LA County Trends

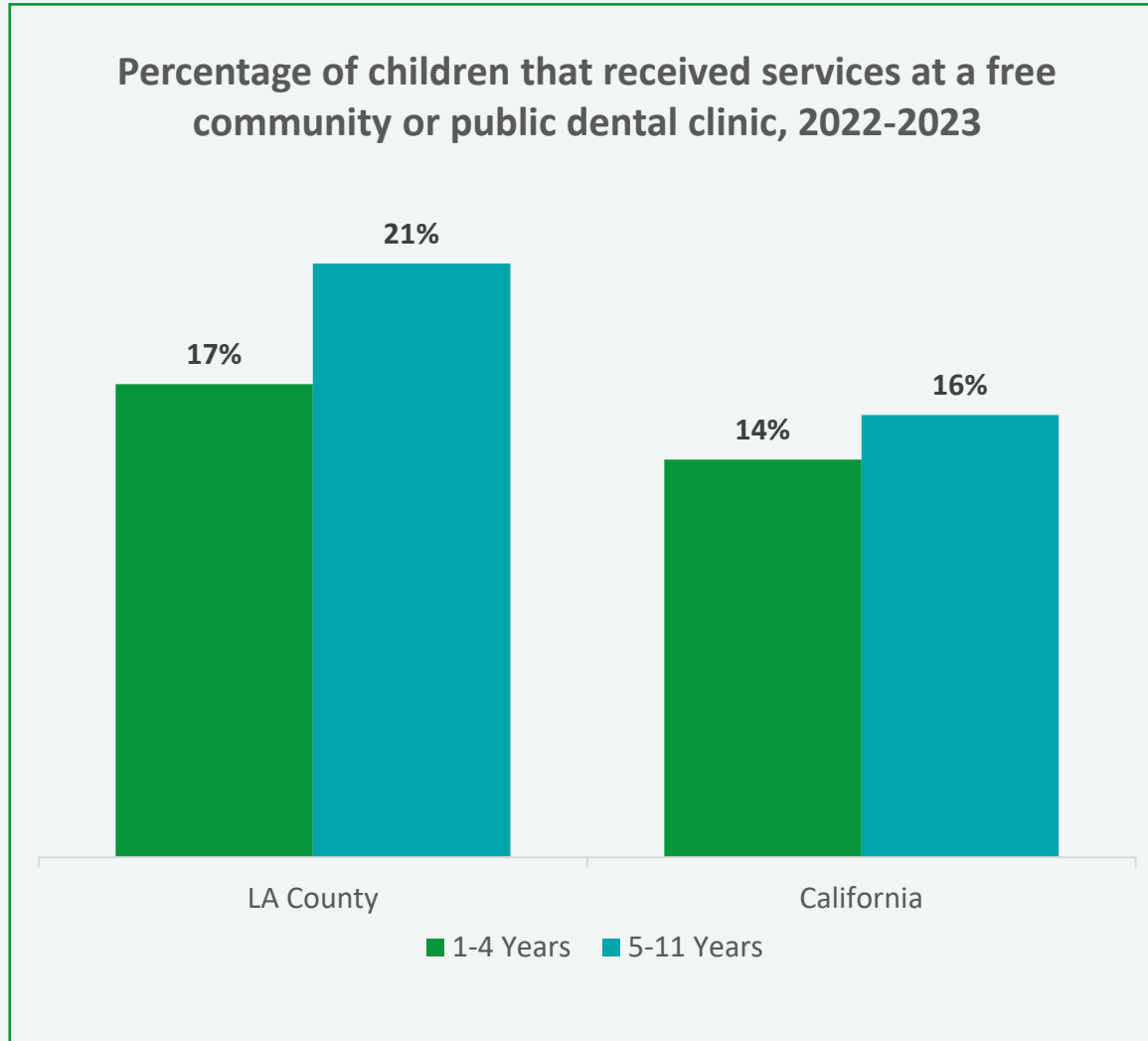
Percentage of LA County Medicaid (Medi-Cal) enrollees with a dental visit by age and year, 2013, 2019, 2020, 2022



\*Denominator=Number enrolled for 90 continuous days

- From 2013 to 2019, the percentage of Medi-Cal enrollees with a dental visit increased for all age groups but decreased in 2020 due to COVID related dental office closures
- From 2020 to 2022, there was an increase in the percentage of Medi-Cal enrollees with a dental visit

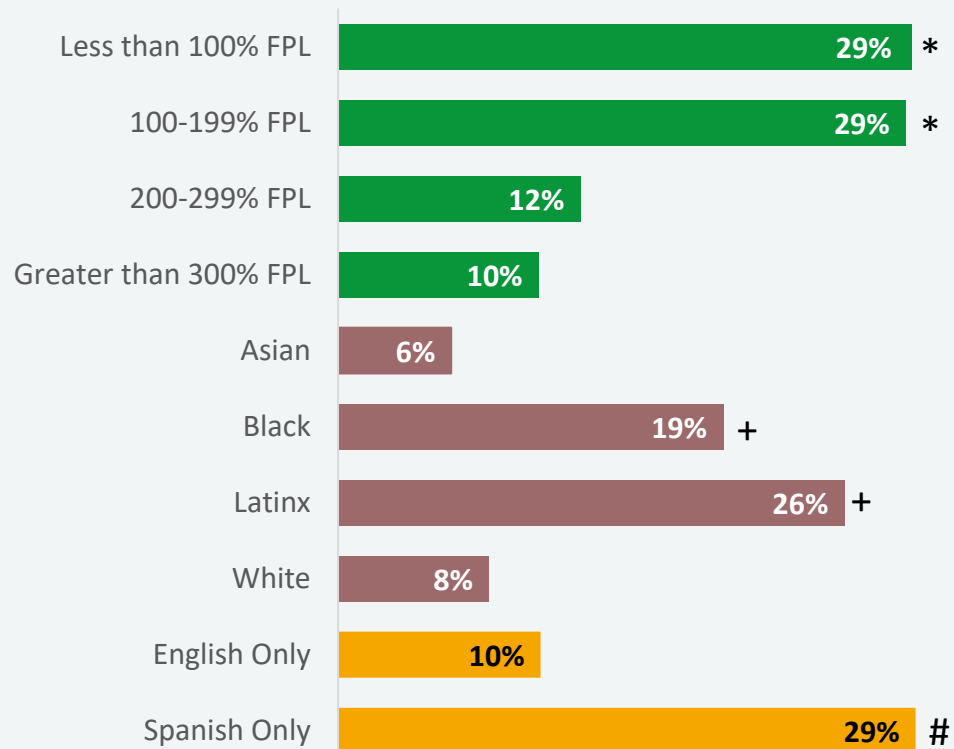
# Use of Free/Public Clinics Among Children - Overall Prevalence



- The percentage of children that received dental care at a free community or public dental clinic was slightly higher in LA County compared to California
- Data for the US is not available

# Use of Free/Public Clinics Among Children - California<sup>1</sup> Disparities

Percentage of California<sup>1</sup> children 1-11 years that used a free or public dental clinic by selected characteristics, 2022-2023



\*Significantly higher prevalence than  $\geq 300\%$  FPL

+Significantly higher prevalence than White children

#Significantly higher prevalence than English only

FPL = Federal poverty level



Lower income children are significantly more likely to use free/public dental clinics compared to their higher income peers



Latinx children are more likely to use free/public dental clinics compared to children from other racial/ethnic groups



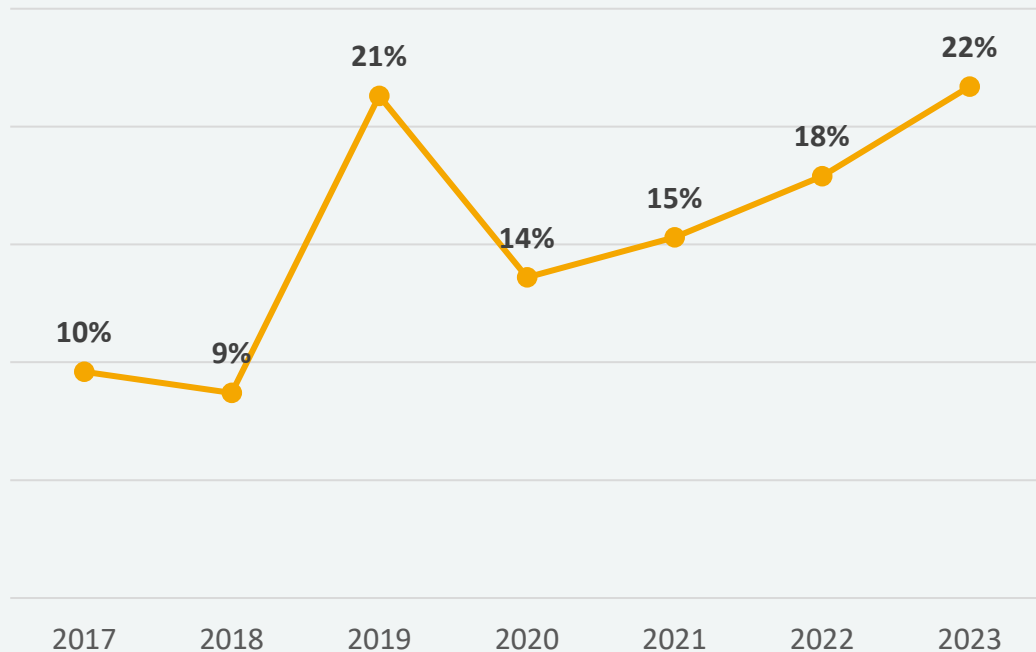
Children from households where Spanish is the primary language are more likely to use free/public dental clinics compared to children from English speaking households

- Data Source: California Health Interview Survey (CHIS), 2022-2023 pooled, <https://ask.chis.ucla.edu/>
- CHIS question: Asked of children older than two or younger children with teeth
- Accessed 06-18-2025

<sup>1</sup> Because of small sample sizes, LA County data is not available

# Use of Free/Public Clinics Among Children - LA County Trends

Percentage of LA County children 1-11 years that used a free or public dental clinic by survey year



- The percentage of children that used a free community or public dental clinic doubled between 2017 and 2019, fell in 2020, then increased to pre-COVID levels by 2023



# Missed School Because of Dental Problems

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**Children 5-11 Years**  
**Adolescents 12-17 Years**

# Missed School Days Because of Dental Problems\*

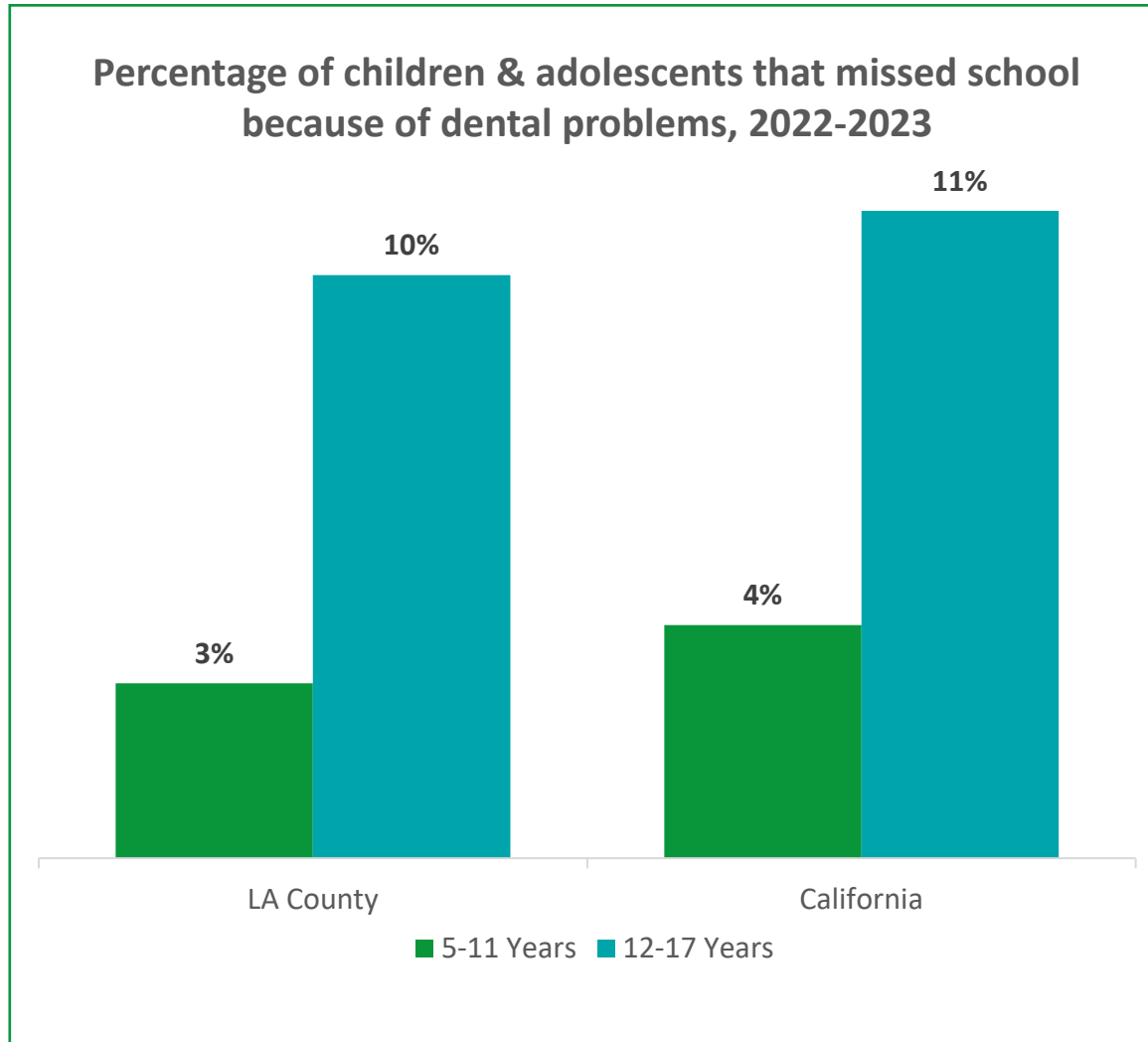
## DATA-AT-A-GLANCE

Indicator/Population Group	LA County	California	United States
Missed school because of dental problems*	Percentage (Year)	Percentage (Year)	Percentage (Year)
Children 5-11 years	3% (2022-2023)^	4% (2022-2023)	Not Available
Adolescents 12-17 years	10% (2022-2023)	11% (2022-2023)	Not Available

\* Does not include dental visits for cleanings or check-ups

^ Estimate is statistically unstable

# Missed School Because of Dental Problems - Overall Prevalence



- The percentage of children that missed school because of dental problems is the same for LA County and California
- Data for the US is not available
- Information on disparities and LA County trends are not presented because estimates are statistically unstable
- **IMPORTANT NOTE:** *Parents* reported missed school days for children 5-11 while *adolescents* reported their own missed school days



# Problems Accessing Dental Care

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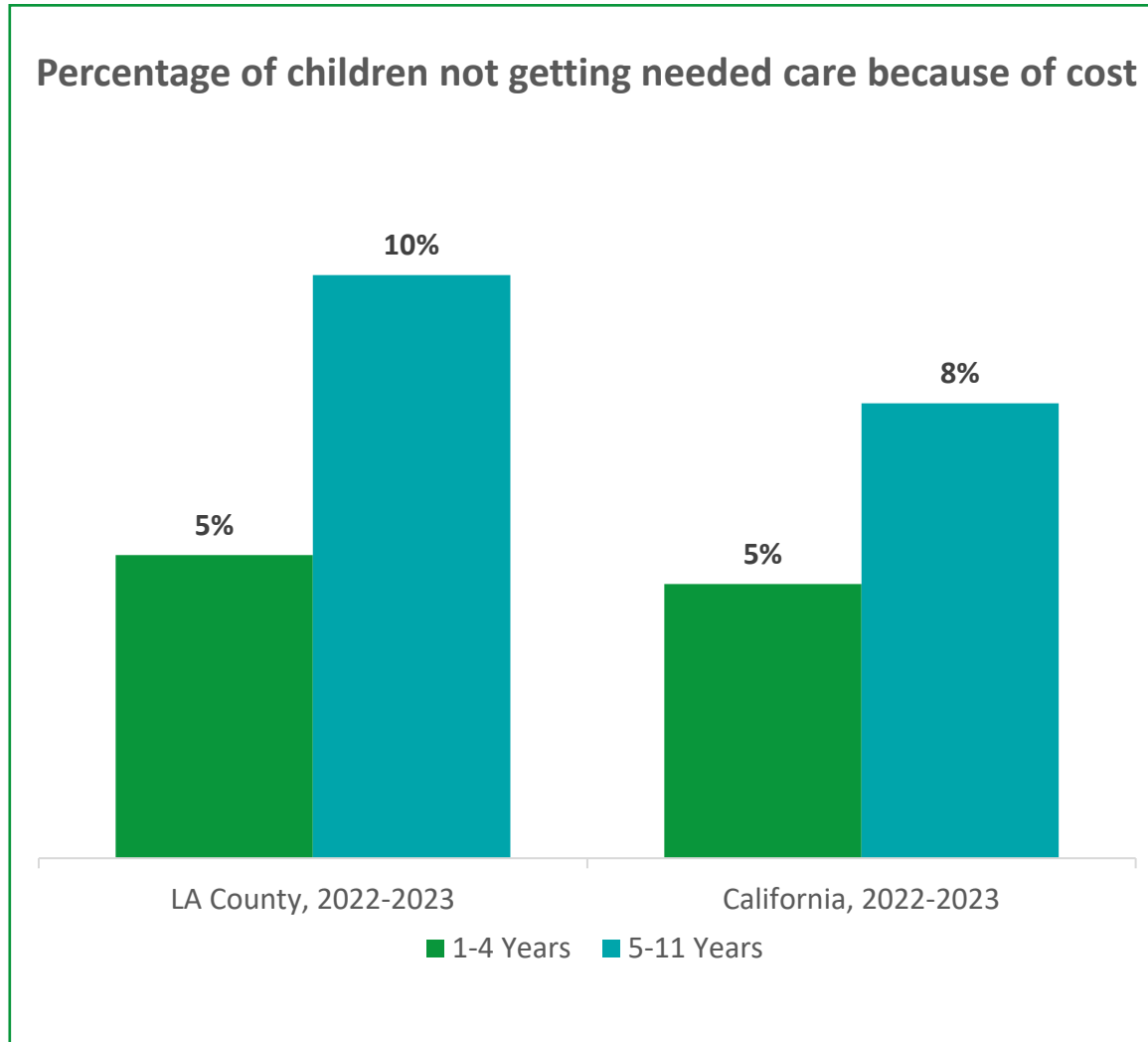
**Children 1-11 Years**

# Problems Accessing Dental Care

## *DATA-AT-A-GLANCE*

Indicator/Population Group	LA County	California	United States
Could not afford needed dental care	Percentage (Year)	Percentage (Year)	Percentage (Year)
Children 1-4 years	5% (2022-2023)	5% (2022-2023)	Not Available
Children 5-11 years	10% (2022-2023)	8% (2022-2023)	Not Available

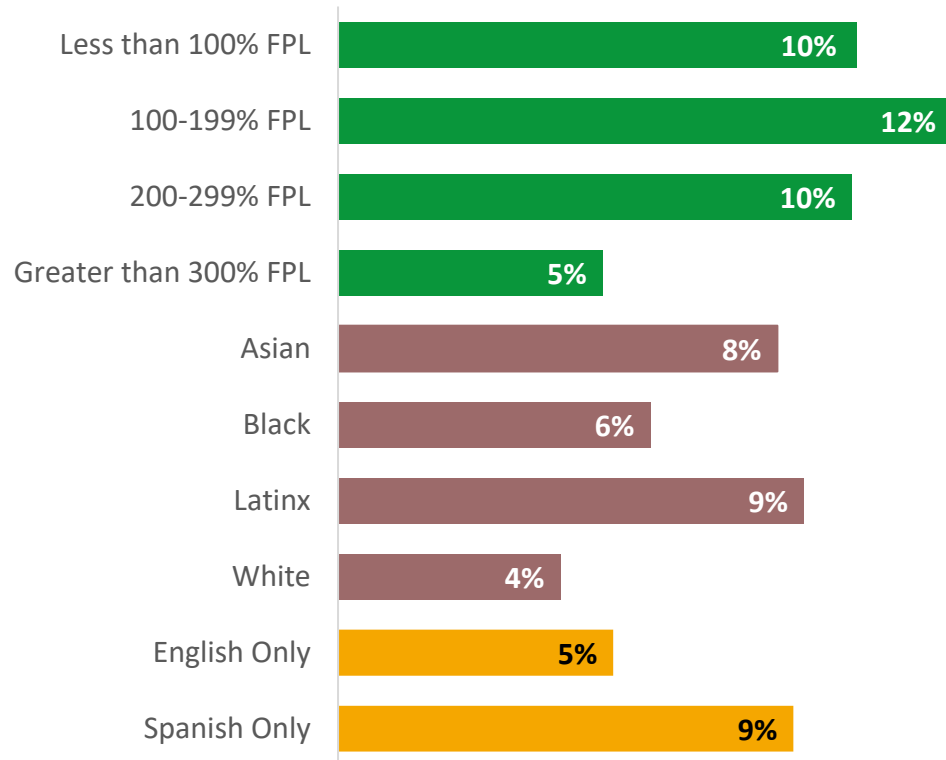
# Could Not Afford Needed Dental Care - Overall Prevalence



- The California Health Interview Survey (CHIS) asked parents if there was a time when their child needed dental care but did not get it because they could not afford it
- The percentage of parents reporting problems accessing dental care because of cost is similar for LA County and California
- Data for the US is not available

# Could Not Afford Dental Care - California<sup>1</sup> Disparities

Percentage of California<sup>1</sup> children 1-11 years that did not receive needed dental care because of cost, 2022-2023



FPL = Federal poverty level



Children from lower-income families are more likely to report problems accessing dental care compared to children from families with an income > 300% FPL



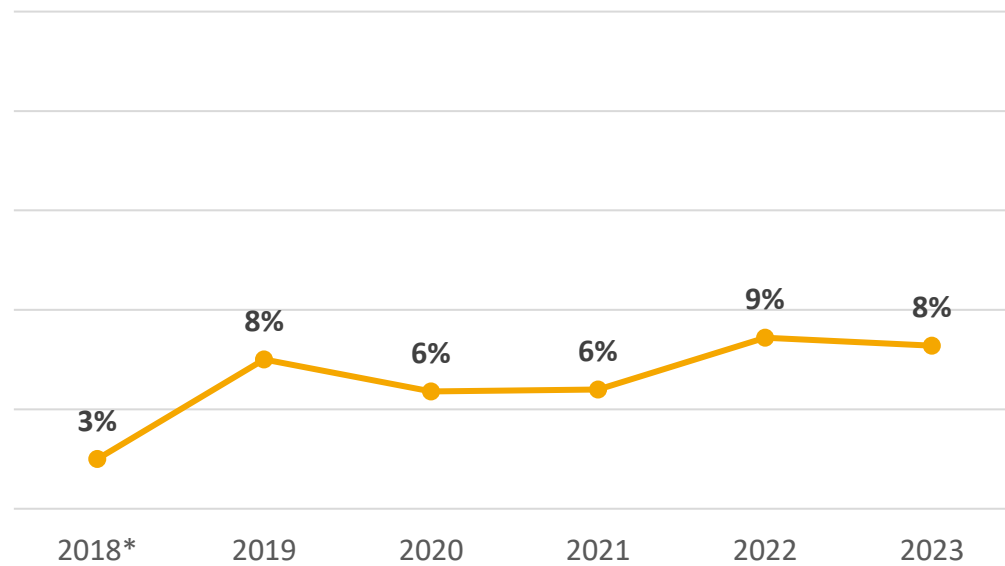
Asian and Latinx children are more likely to have problems accessing dental care because of cost compared to White children

- Data Sources: California Health Interview Survey (CHIS), 2022-2023 pooled, <https://ask.chis.ucla.edu/>
- CHIS question: asked of children older than 2 or younger than 2 with teeth
- Accessed 06-18-2025

<sup>1</sup> Because of small sample sizes, LA County data is not available

# Could Not Afford Dental Care - LA County Trends

Percentage of LA County children 1-11 years that did not receive needed dental care because of cost by survey year



\* Estimates for 2018 are statistically unstable

- This question was not asked prior to 2018
- Estimates for 2018 are statistically unstable



# Dental Insurance Coverage

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**Children 1-11 Years**  
**Adults 18+ Years**

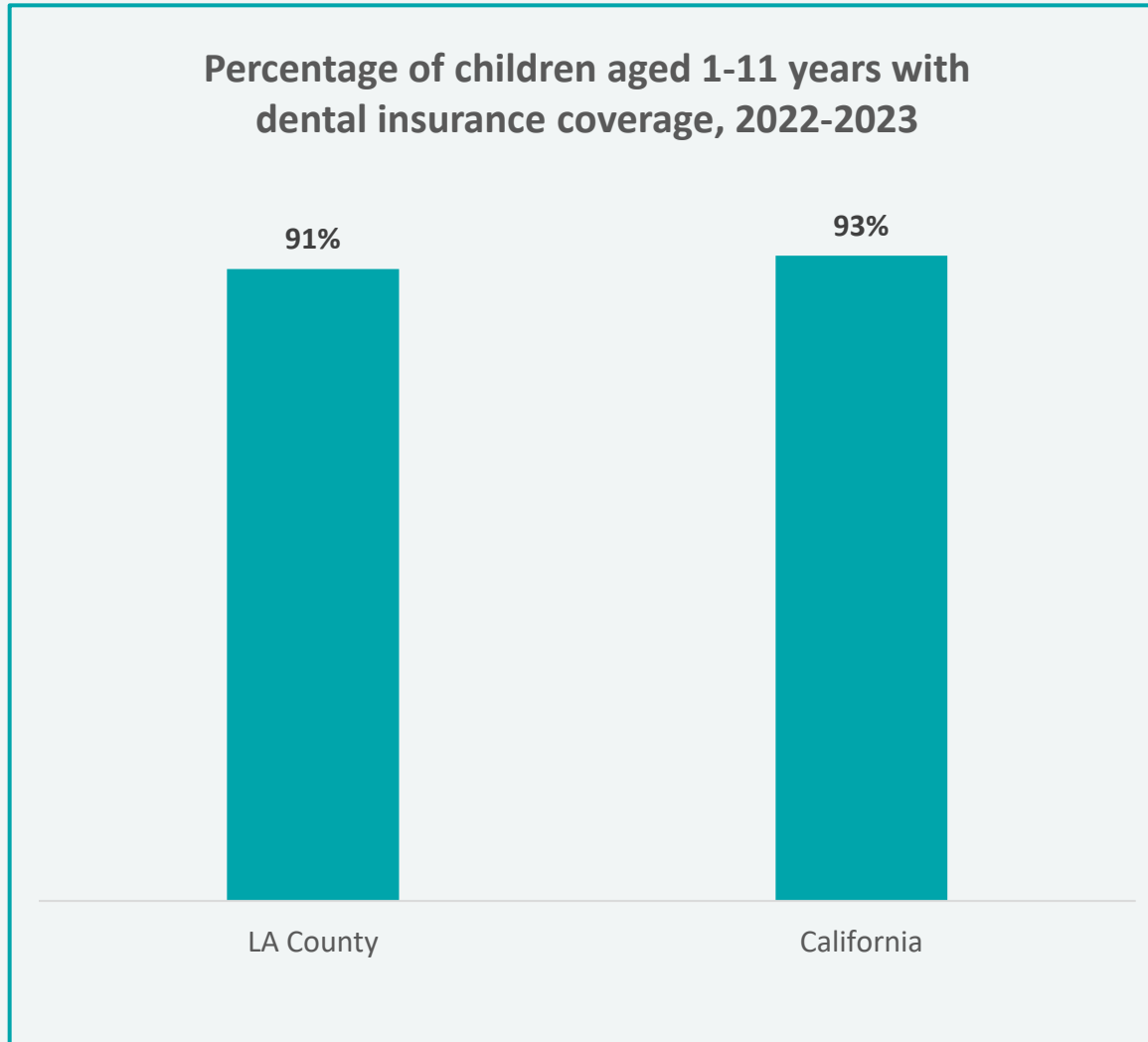
# DENTAL INSURANCE COVERAGE

## DATA-AT-A-GLANCE

Age/Indicator	LA County 2013	LA County 2022-2023	California 2022-2023	United States
<b>1-11 Years</b>				
Has dental insurance coverage	88%	91%	93%	Not Available
Parents pays for any/all dental insurance*	Not Available	41%	46%	Not Available
<b>18+ Years</b>				
Has dental insurance coverage	52%	69%	72%	Not Available

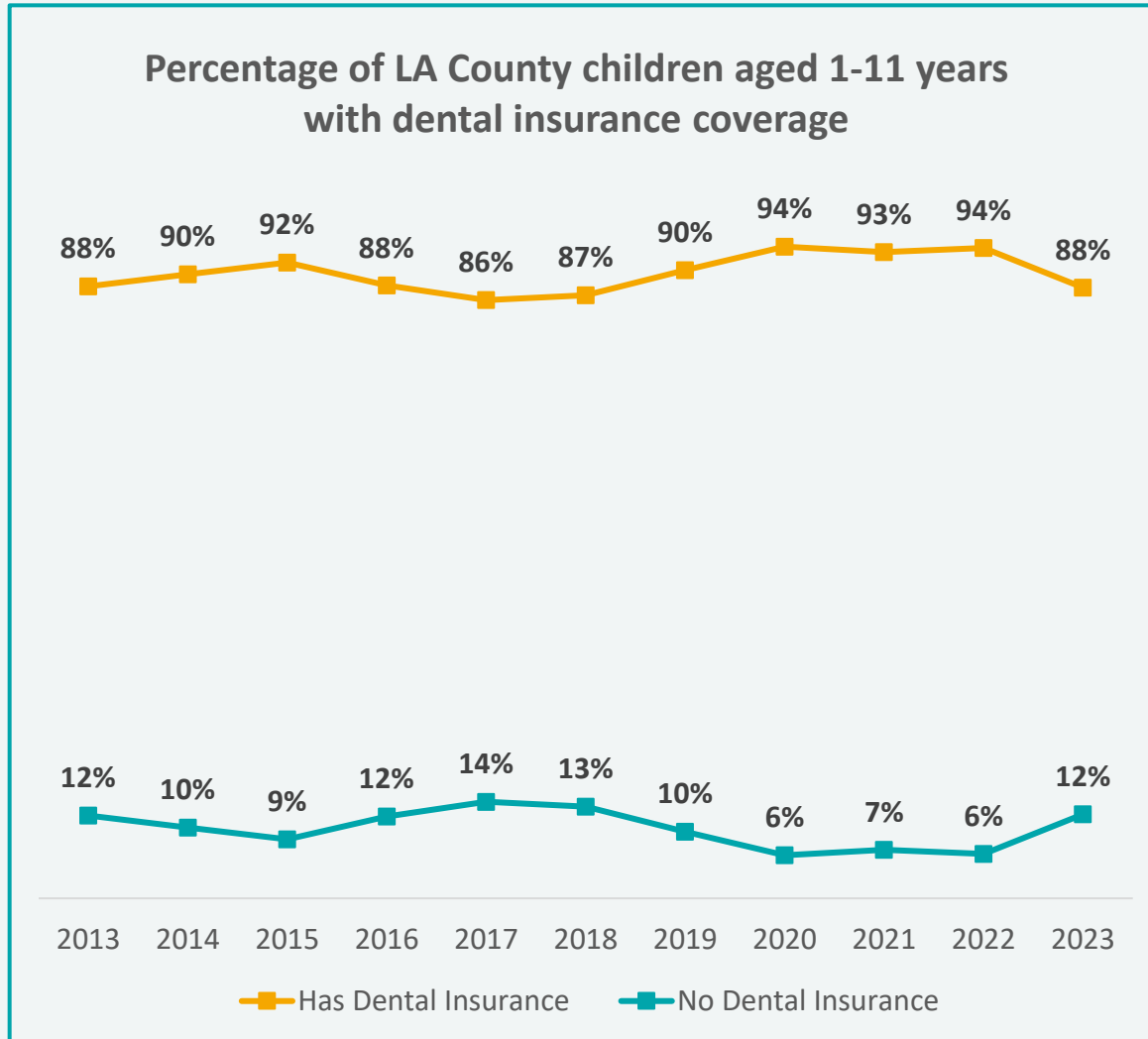
\* Limited to children with dental insurance

# Dental Insurance Among Children 1-11 Years - Overall Prevalence



- Almost all children in California and LA County have dental insurance
  - Comparable data for the United States is not available
- In LA County, there are no disparities in terms of dental insurance coverage
  - The percentage of children with dental insurance coverage does not vary by socioeconomic status, race/ethnicity, or language spoken at home

# Dental Insurance Among Children 1-11 Years - LA County Trends

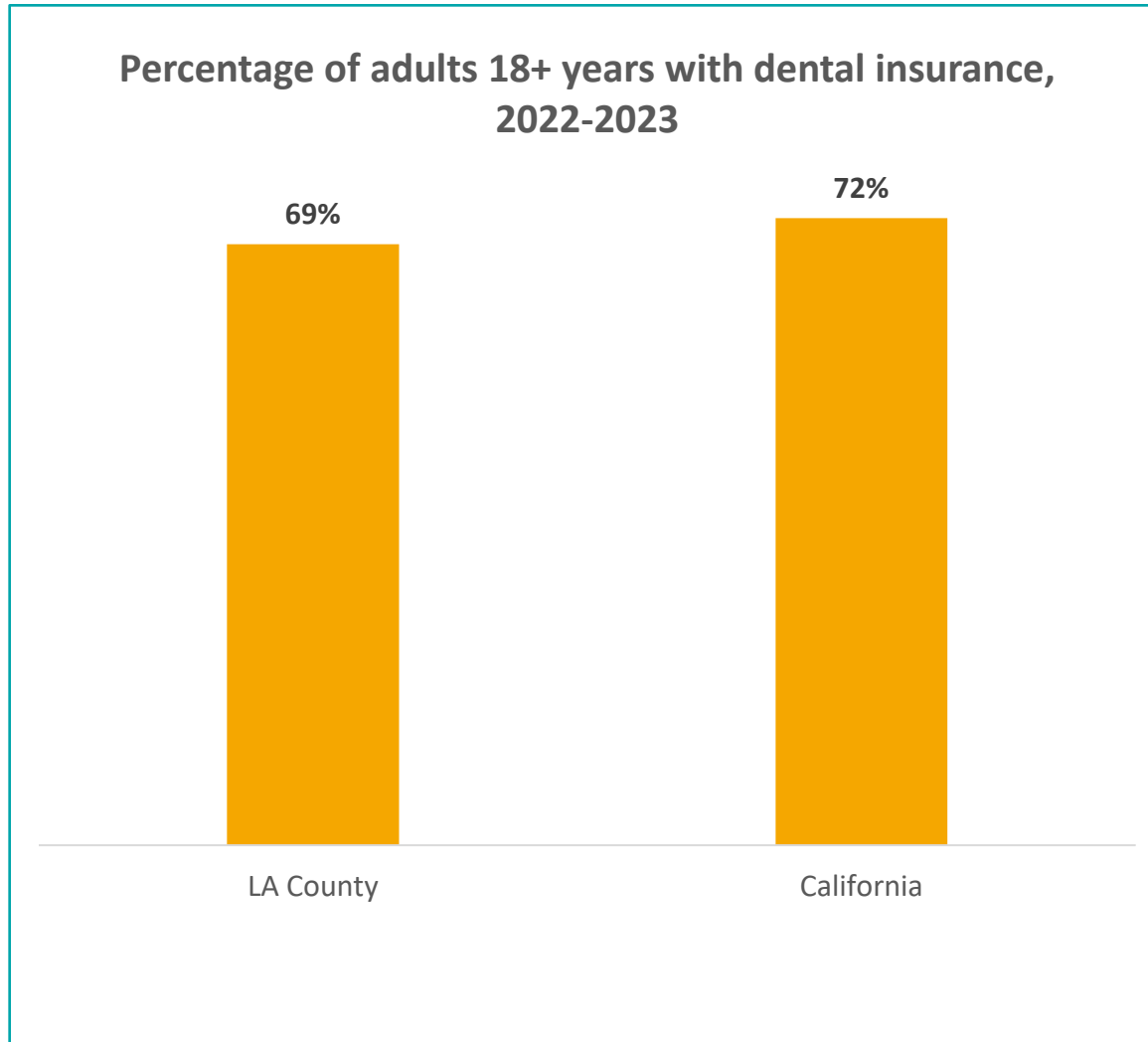


- Since 2013, the percentage of LA County children with dental insurance coverage has remained stable

41%

The percentage of parents that report paying any or all of the premium or cost for their child's dental insurance

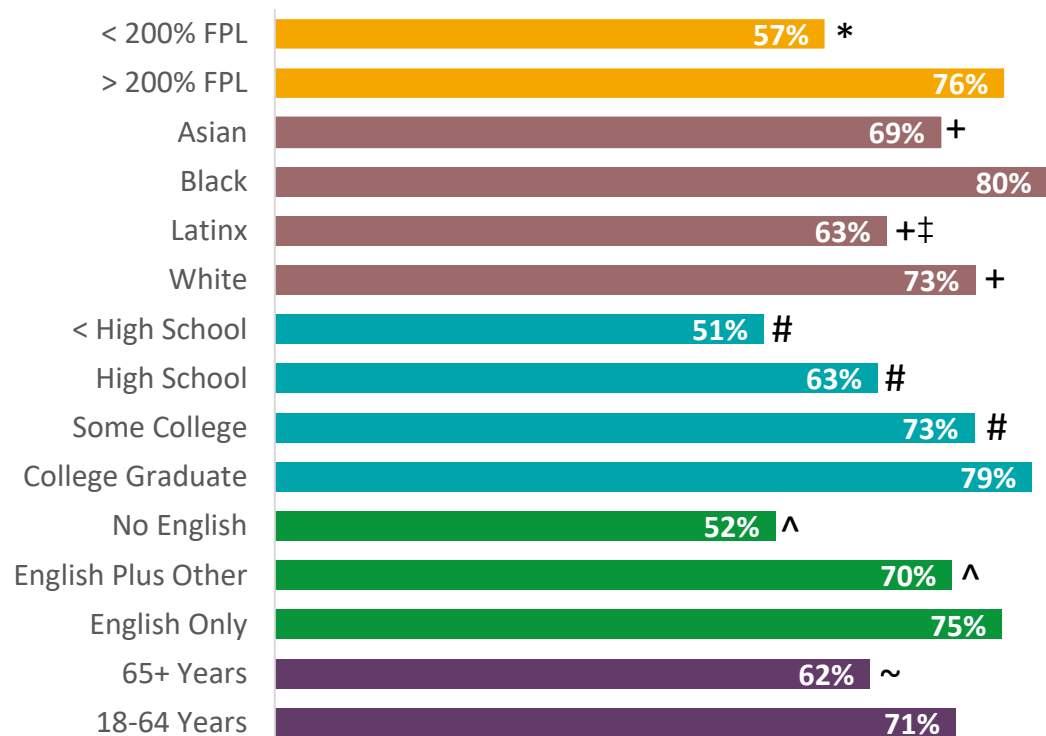
# Dental Insurance Among Adults 18+ Years - Overall Prevalence



- About 7-of-10 adults in California and LA County have dental insurance
- Comparable data for the United States is not available

# Dental Insurance Among Adults 18+ Years - LA County Disparities

Percentage of LA County adults aged 18+ years with dental insurance coverage, 2022-2023



\*Significantly lower than > 200% FPL  
 +Significantly lower than Black adults  
 ‡Significantly lower than White adults

#Significantly lower than college graduates  
 ^Significantly lower than adults that speak only English  
 ~Significantly lower than adults 18-64 years



Lower income adults are significantly less likely to have dental insurance compared to higher income adults



Latinx adults are significantly less likely to have dental insurance compared to Black/African American and White adults



Adults with less than a college degree are significantly less likely to have dental insurance compared to adults with a college degree

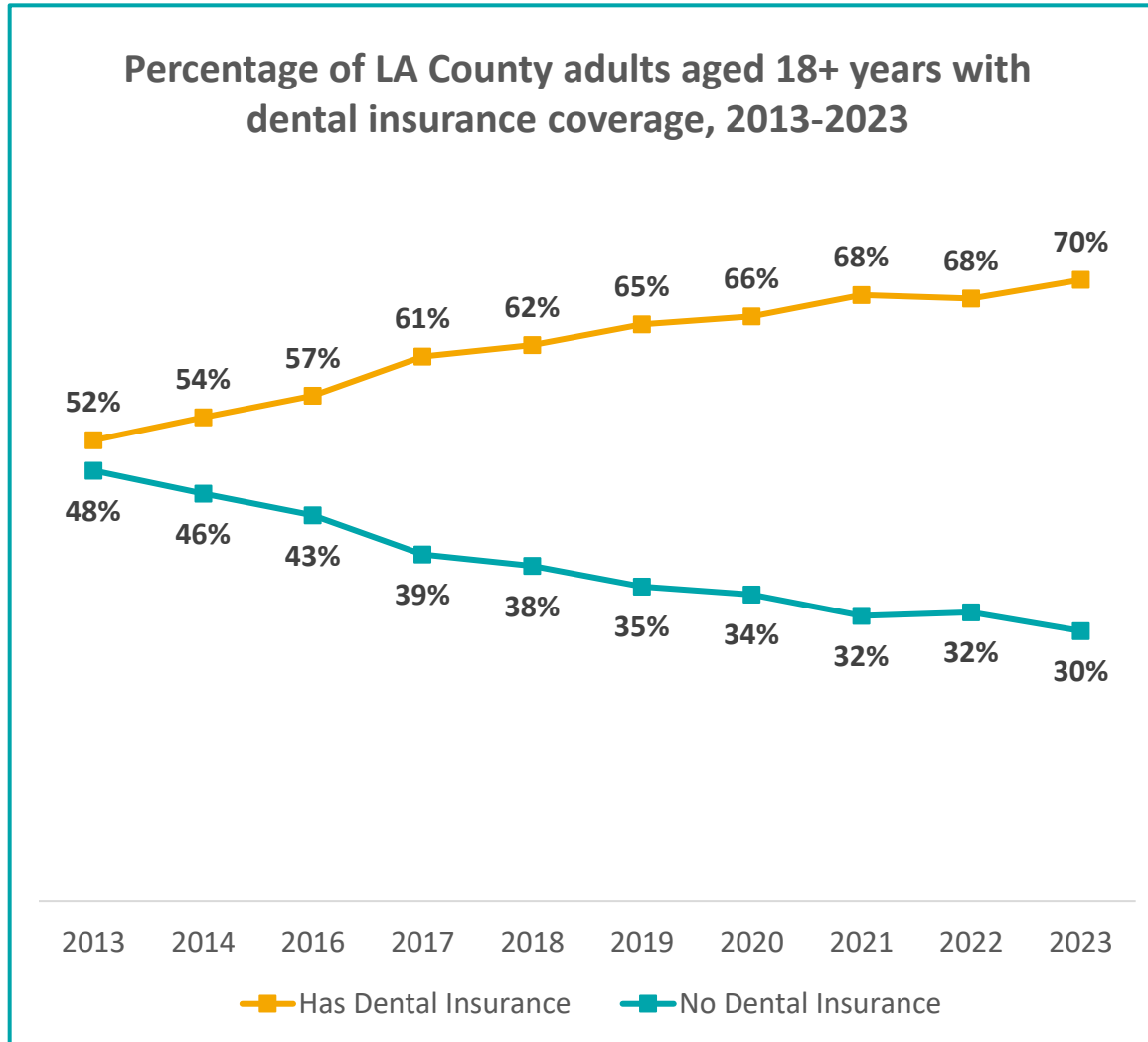


Adults that speak non-English languages at home are significantly less likely to have dental insurance compared to adults that speak only English



Older adults are significantly less likely to have dental insurance compared to younger adults aged 18-64 years

# Dental Insurance Among Adults 18+ Years - LA County Trends



- Since 2013, the percentage of LA County adults with dental insurance has steadily increased



# Preventive Services Among Medicaid Enrollees

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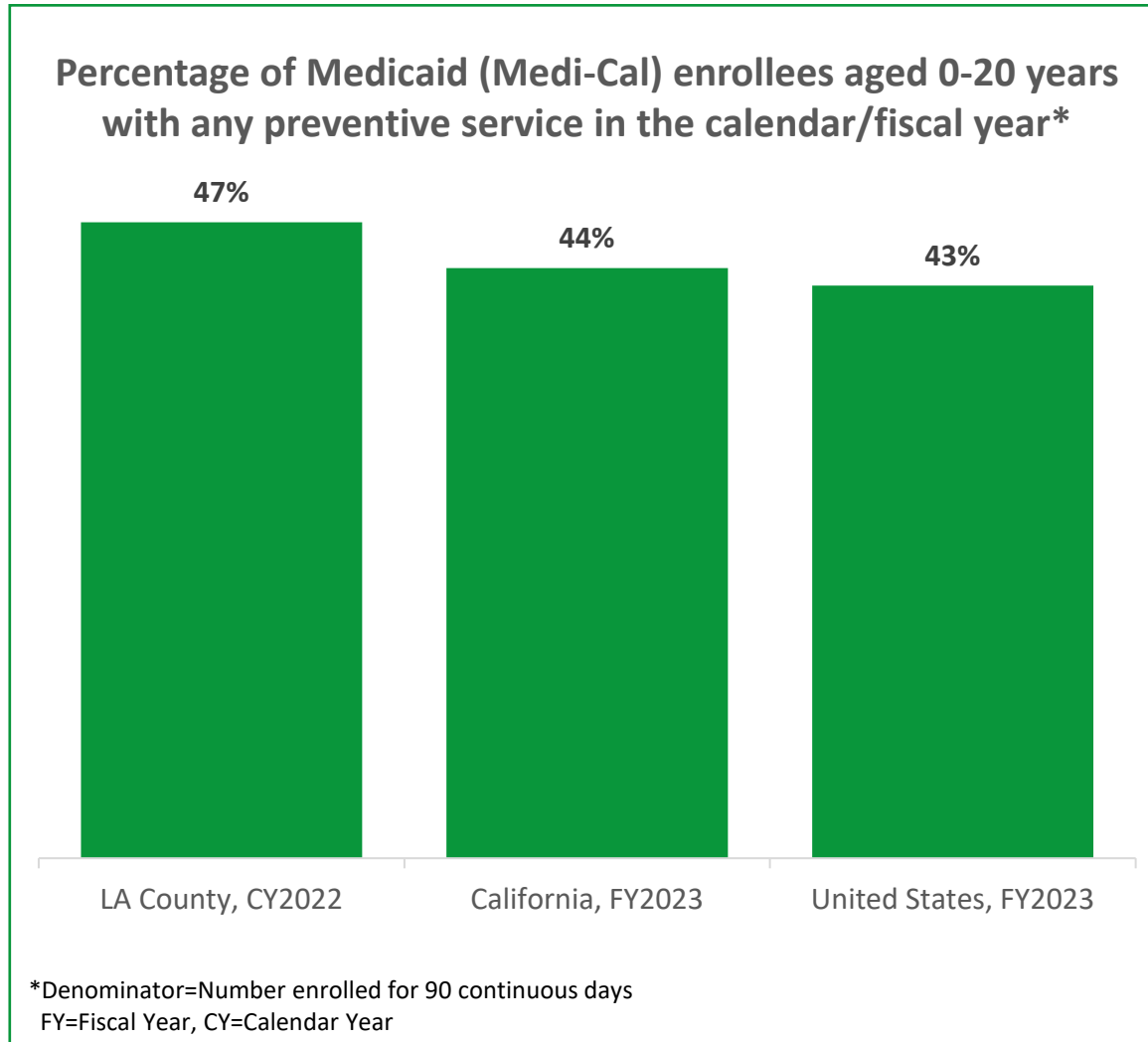
**Any Preventive Service  
Dental Sealants**

# PREVENTIVE SERVICES AMONG MEDICAID ENROLLEES

## DATA-AT-A-GLANCE

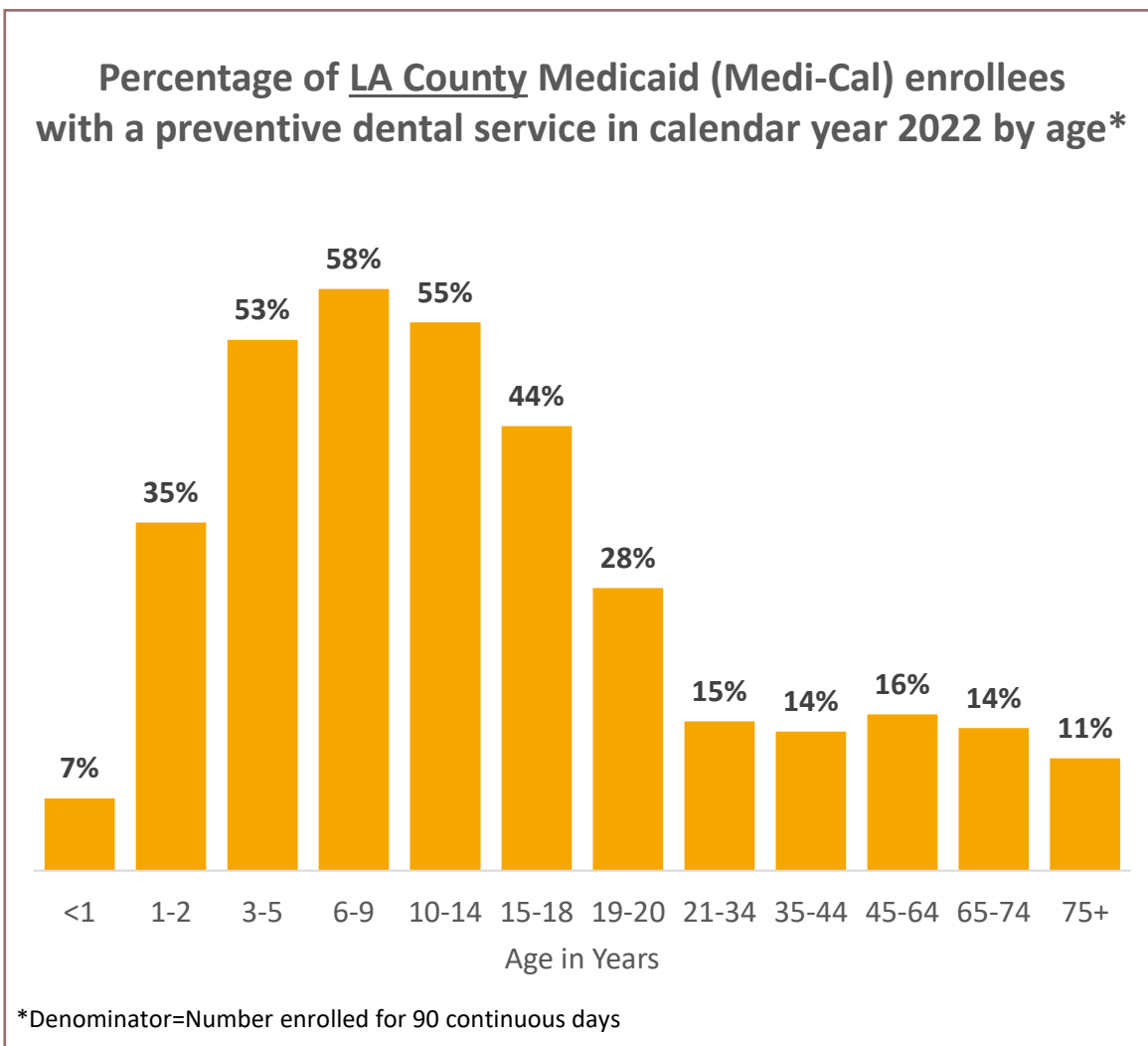
Indicator/Age	LA County 2013	LA County CY2019	LA County CY2022	California FY2023	United States FY2023
<b>Any preventive service</b>					
Children 0-20 years	42%	47%	47%	44%	43%
Adults 21+ years	2%	13%	15%	14%	Not Available
<b>Dental sealants permanent molars</b>					
Children 6-9 years	20%	22%	20%	17%	15%
Children 10-14 years	11%	13%	13%	15%	12%

# Any Preventive Service Among Medicaid Children - Prevalence



- The percentage of Medicaid enrolled children aged 0-20 years with a preventive dental service in the calendar/fiscal year is slightly higher in LA County compared to California and the US

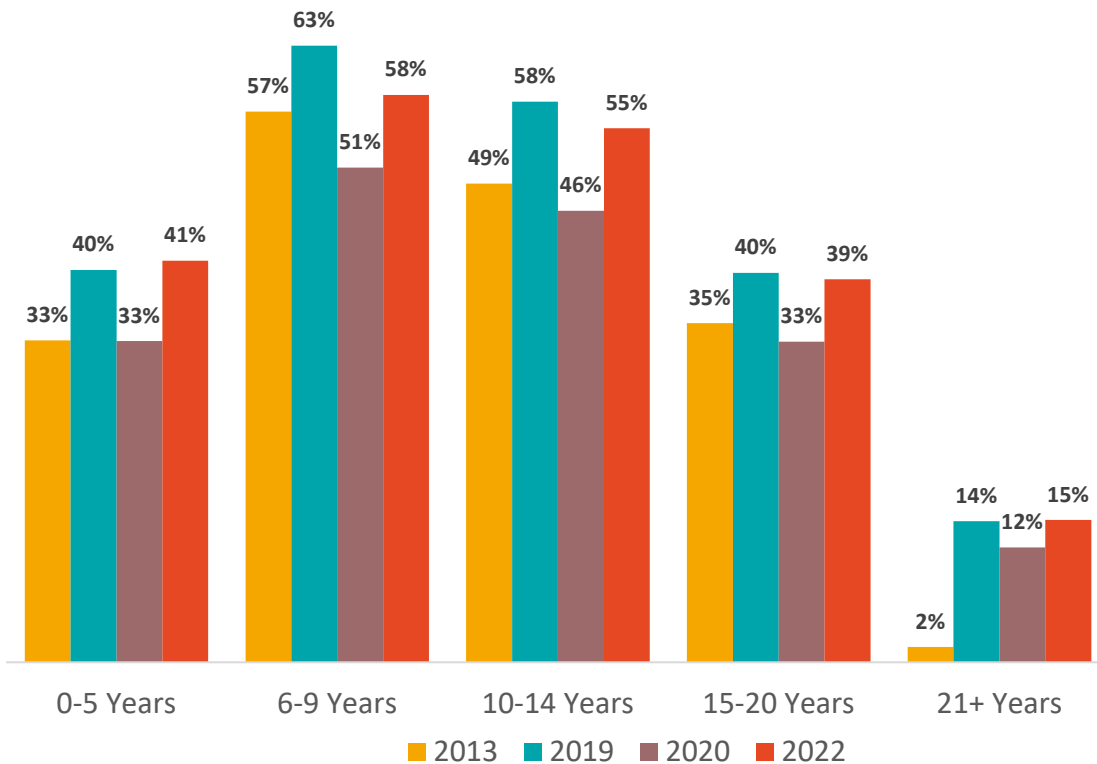
# Any Preventive Service Among Medicaid Enrollees - Prevalence



- The percentage of Medi-Cal enrollees with a preventive dental service is highest among children 6-9 years of age
- For Medi-Cal adults, fewer than 1 out of 6 had a preventive dental service in 2022

# Any Preventive Service Among Medicaid Enrollees - LA County Trends

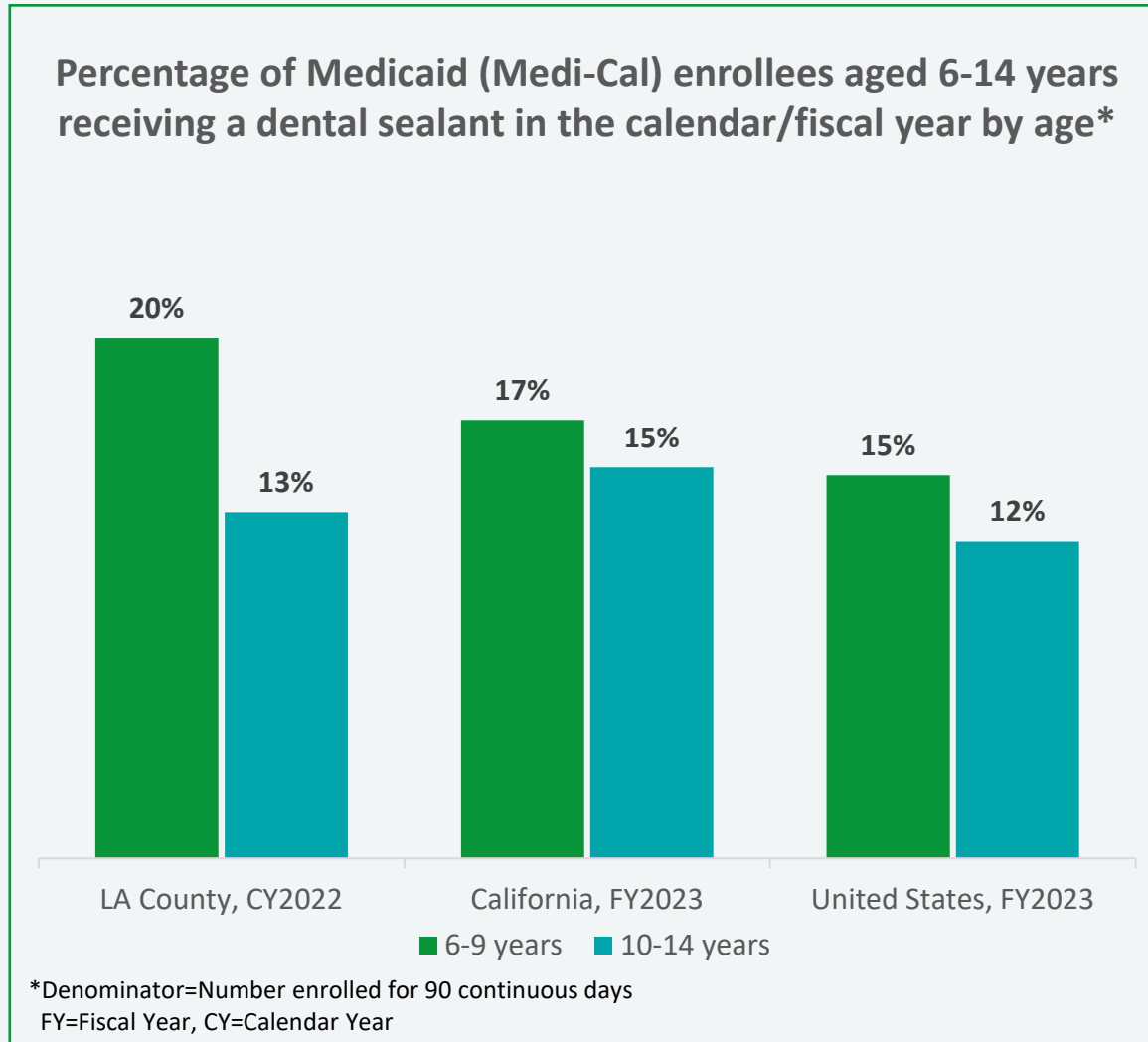
Percentage of LA County Medi-Cal enrollees with a preventive dental service by age and year, 2013, 2019, 2020 & 2022\*



\*Denominator=Number enrolled for 90 continuous days

- Between 2013 and 2019, the percentage of Medi-Cal enrollees with a preventive dental service increased for all age groups but declined in CY2020 due to COVID-19
- In CY2022, the percentage of Medi-Cal enrollees with a preventive dental service increased for all age groups

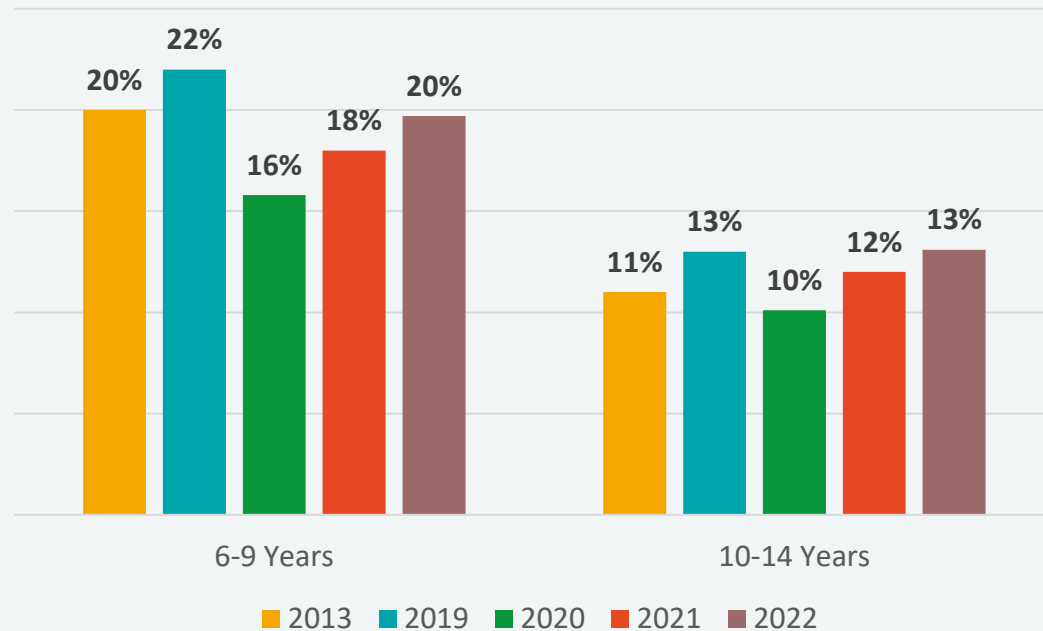
# Dental Sealant Placement Among Medicaid Children - Prevalence



- The percentage of Medicaid enrolled children aged 6-9 years that received a sealant on a permanent molar was higher in LA County when compared to California and the US
- The percentage of Medicaid enrolled children aged 10-14 years that received a sealant on a permanent molar in LA County was similar to California and the US

# Dental Sealants Among Medicaid Enrollees - LA County Trends

Percentage of LA County Medi-Cal enrollees that received a dental sealant by age and calendar year, 2013, 2019-2022\*



\*Denominator=Number enrolled for 90 continuous days

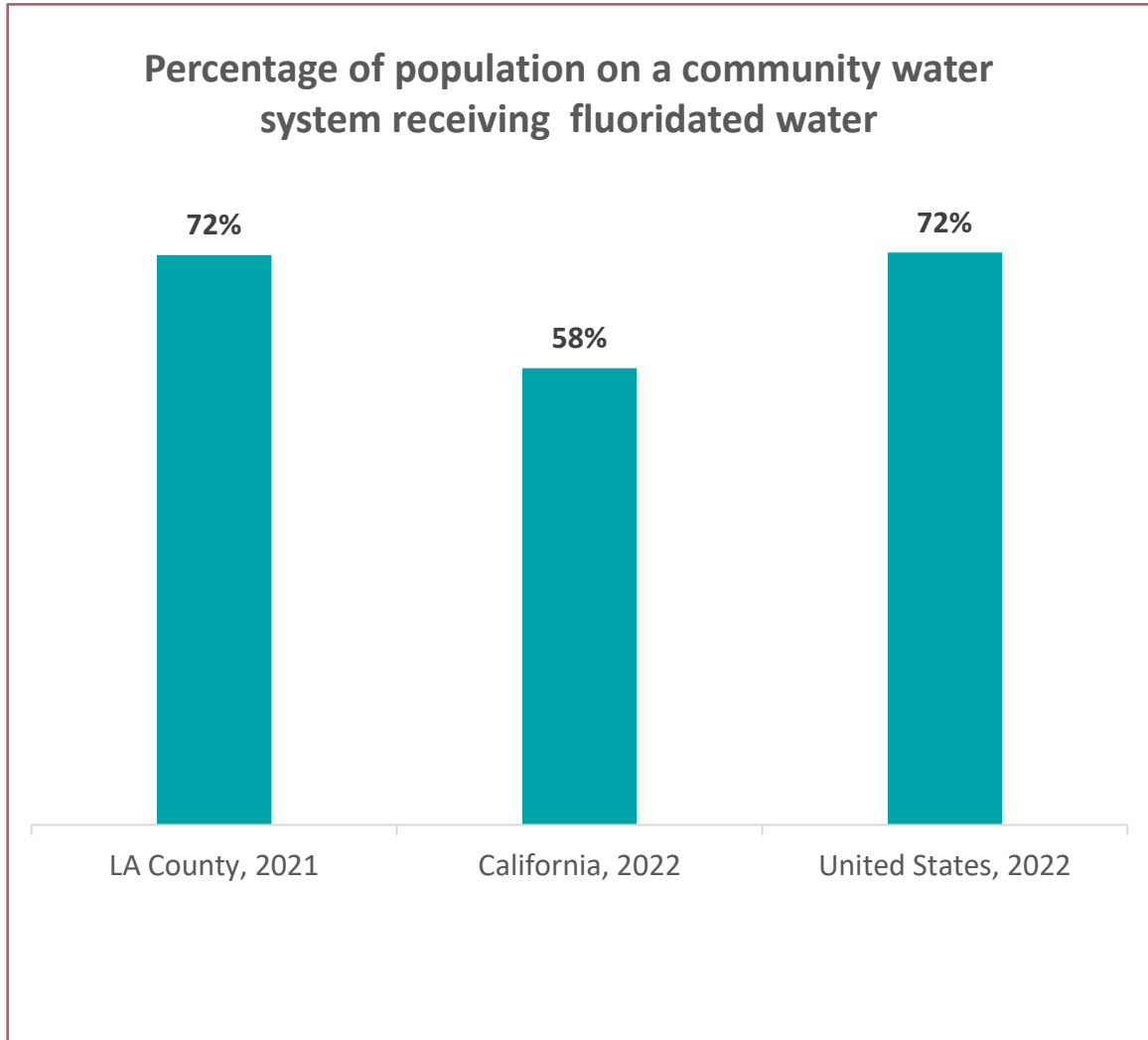
- The percentage of Medi-Cal enrollees aged 6-9 and 10-14 years that received a dental sealant on a permanent molar was similar in 2013 and 2019, decreased in 2020, then increased in 2021 and 2022



# Community Water Fluoridation

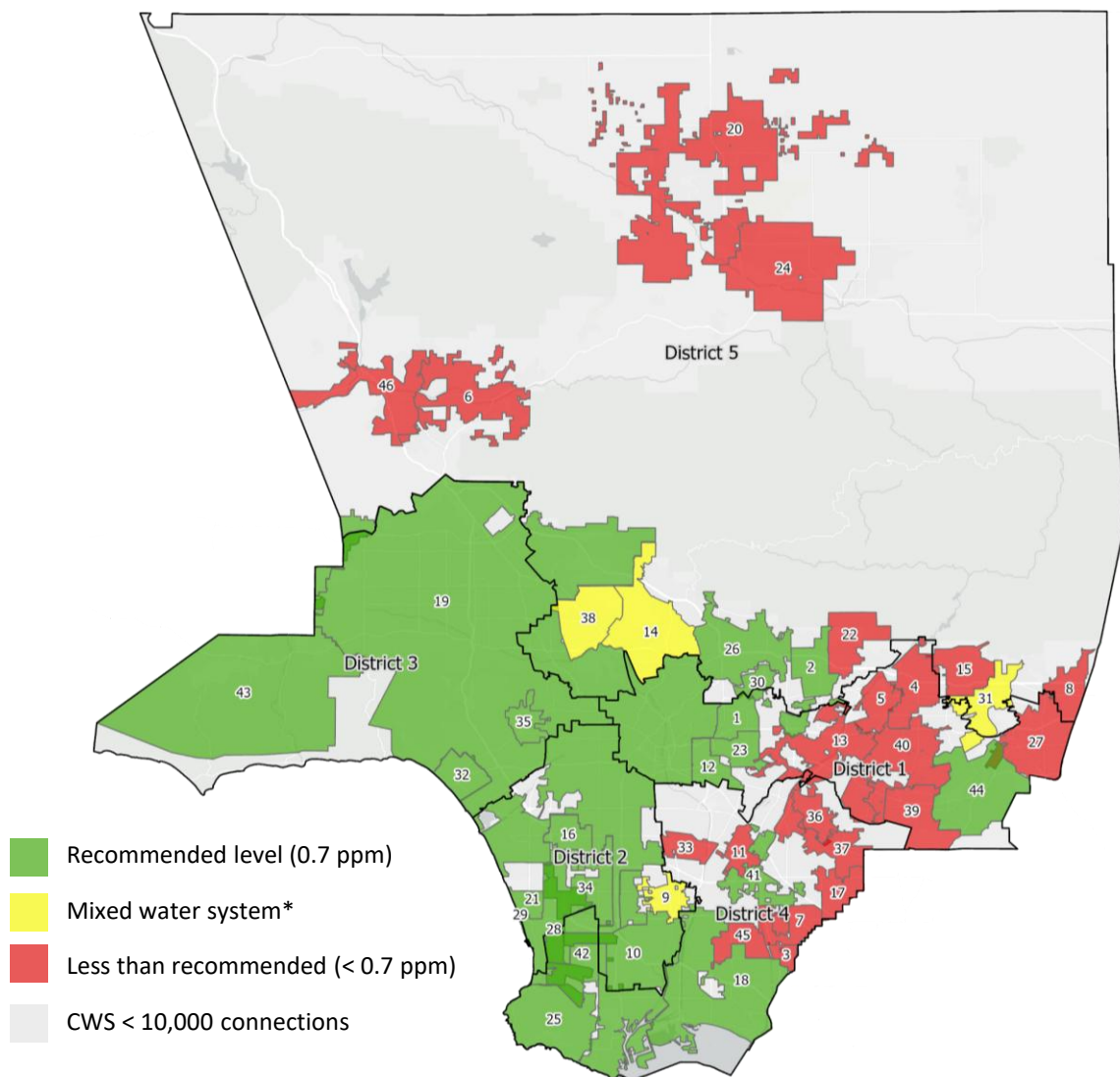
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# Community Water Fluoridation



- The percentage of the population receiving fluoridated water is higher in LA County when compared to the California average
- **NOTE:** The LA County fluoridation data is the percentage of the population served by water systems with 10,000+ connections that receive the recommended level of fluoride

# Fluoridation Status of Water Systems With 10,000+ Connections, 2021



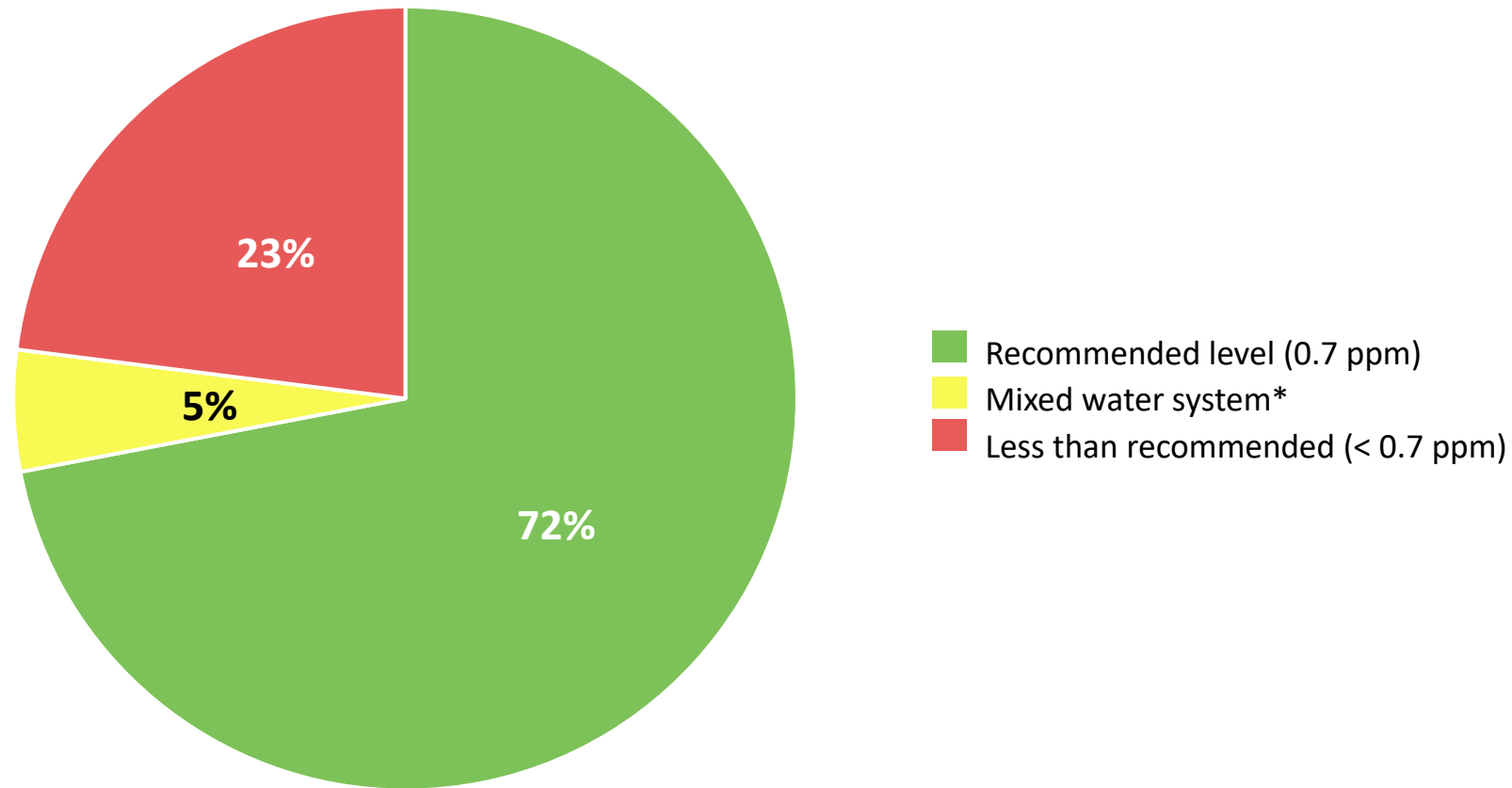
Map Number	Water System Name	Map Number	Water System Name
1	CITY OF ALHAMBRA	24	PALMDALE WATER DIST.
2	CITY OF ARCADIA	25	CALIFORNIA WATER SERVICE CO. - PALOS VER
3	GSWC - ARTESIA	26	PASADENA-CITY, WATER DEPT.
4	AZUSA LIGHT AND WATER	27	POMONA - CITY, WATER DEPT.
5	VALLEY COUNTY WATER DIST.	28	CALIFORNIA WATER SERVICE CO. - HERM/REDO
6	SANTA CLARITA VALLEY W.A.-SANTA CLARITA	29	CALIFORNIA WATER SERVICE CO. - HERM/REDO
7	CERRITOS - CITY, WATER DEPT.	30	CAL/AM WATER COMPANY - SAN MARINO
8	GSWC - CLAREMONT	31	GSWC-SAN DIMAS
9	COMPTON-CITY, WATER DEPT.	32	SANTA MONICA-CITY, WATER DIVISION
10	CALIFORNIA WATER SERVICE CO. - DOMINGUEZ	33	SOUTH GATE-CITY, WATER DEPT.
11	DOWNEY - CITY, WATER DEPT.	34	GSWC - SOUTHWEST
12	CALIFORNIA WATER SERVICE CO. - ELA	35	BEVERLY HILLS-CITY, WATER DEPT.
13	SAN GABRIEL VALLEY WATER CO.-EL MONTE	36	WHITTIER-CITY, WATER DEPT.
14	GLENDALE-CITY, WATER DEPT.	37	SUBURBAN WATER SYSTEMS-WHITTIER
15	GLEN DORA-CITY, WATER DEPT.	38	BURBANK-CITY, WATER DEPT.
16	INGLEWOOD- CITY, WATER DEPT.	39	ROWLAND WATER DISTRICT
17	SUBURBAN WATER SYSTEMS-LA MIRADA	40	SUBURBAN WATER SYSTEMS-SAN JOSE
18	LONG BEACH-CITY, WATER DEPT.	41	LIBERTY UTILITIES - BELLFLOWER-NORWALK
19	LOS ANGELES-CITY, DEPT. OF WATER & POWER	42	TORRANCE-CITY, WATER DEPT.
20	LOS ANGELES CWWD 40, REG 4 & 34-LANCASTER	43	LAS VIRGENES MWD
21	MANHATTAN BEACH-CITY, WATER DEPT.	44	WALNUT VALLEY WATER DISTRICT
22	MONROVIA-CITY, WATER DEPT.	45	LAKEWOOD - CITY, WATER DEPT.
23	MONTEREY PARK-CITY, WATER DEPT.	46	SANTA CLARITA VALLEY W.A.-VALENCIA DIVIS

\*Water system has multiple water sources, some with 0.7 ppm fluoride some with <0.7 ppm fluoride

ppm = parts per million, CWS = community water system

Data Source: 2021 Consumer Confidence Report for each water system in LA County with 10,000+ service connections, Created by the Office of Health Assessment and Epidemiology, GIS Unit in collaboration with the Oral Health Program

# Percentage of Population Served by Systems with 10,000+ Connections that Receive the Recommended Level of Fluoride, 2021



\*Water system has multiple water sources, some with 0.7 ppm fluoride some with <0.7 ppm fluoride

ppm = parts per million, CWS = community water system

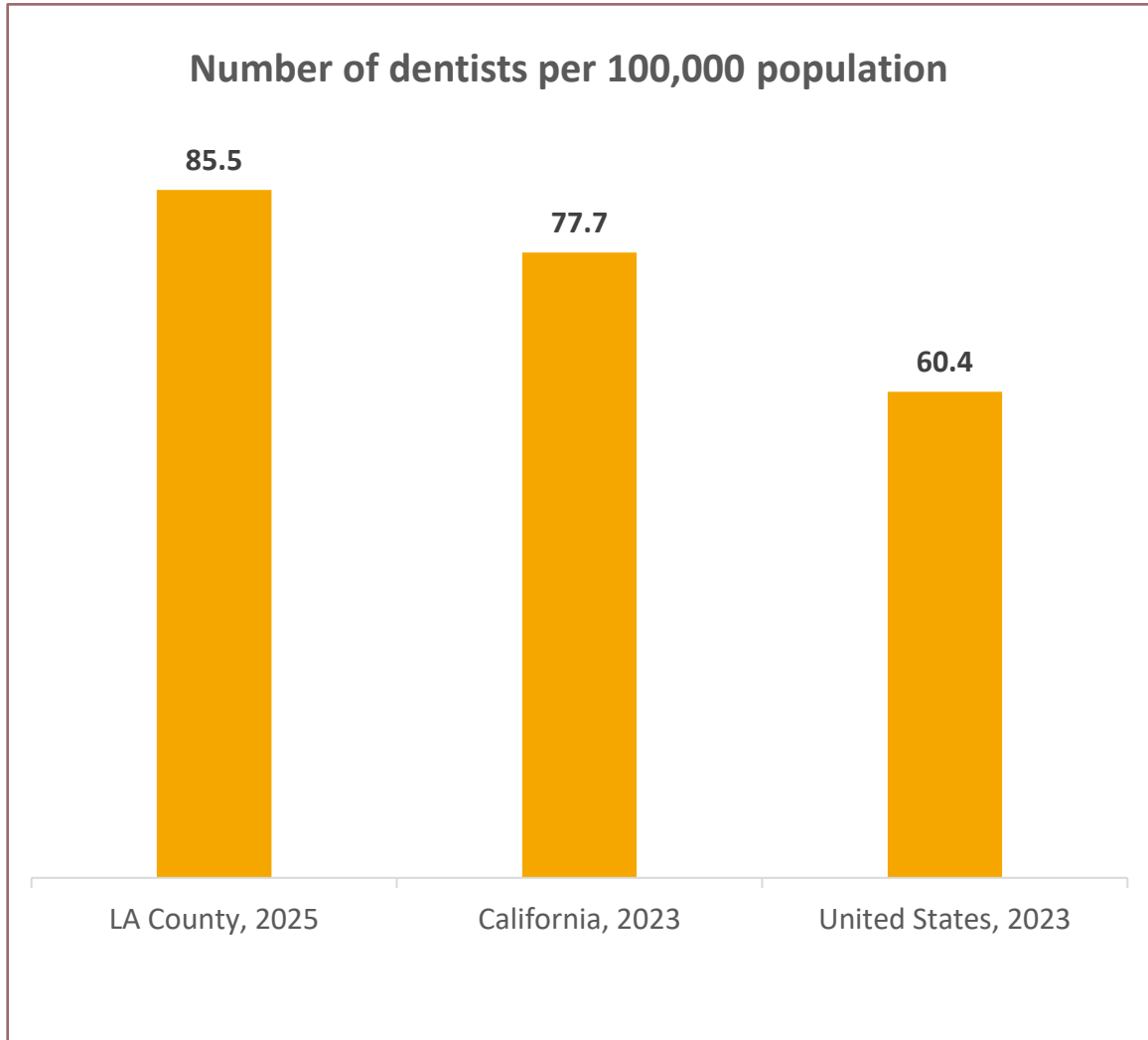
Data Source: 2021 Consumer Confidence Report for each water system in LA County with 10,000+ service connections



# Dental Workforce

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# Number of Dentists

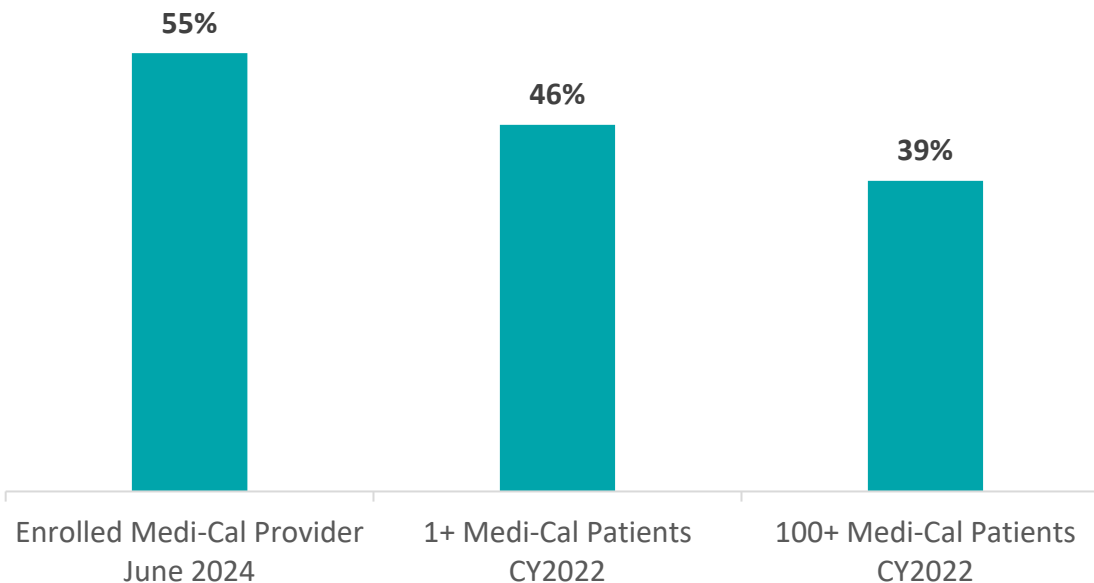


- As of June 2025, there are 8,418 dentists in Los Angeles County with a current active license<sup>1</sup>
- Los Angeles County and California have more dentists per 100,000 population than the United States
- **NOTE:** LA County data is based on the number of dentists with a current active license while California and US data is based on the estimated number of “professionally active dentists” as defined by the American Dental Association

<sup>1</sup> Includes dentists whose license address is in LA County

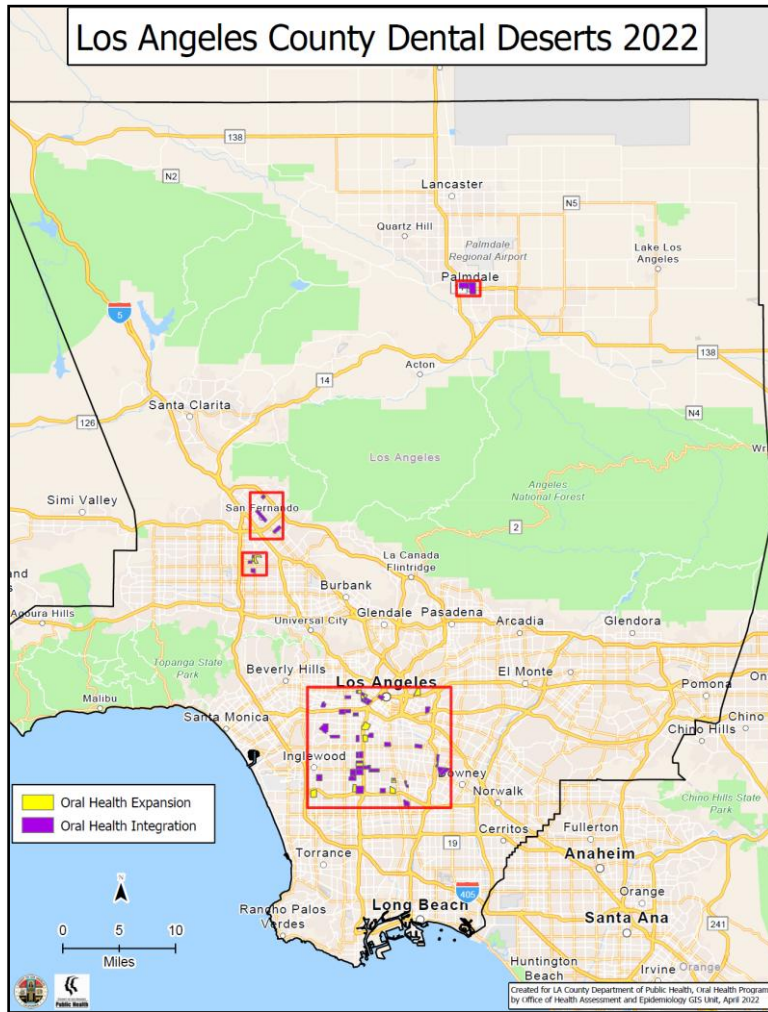
# Medi-Cal Dental Providers

Percentage of LA County dentists that are Medi-Cal providers, provided care to 1+ patient, provided care to 100+ patients



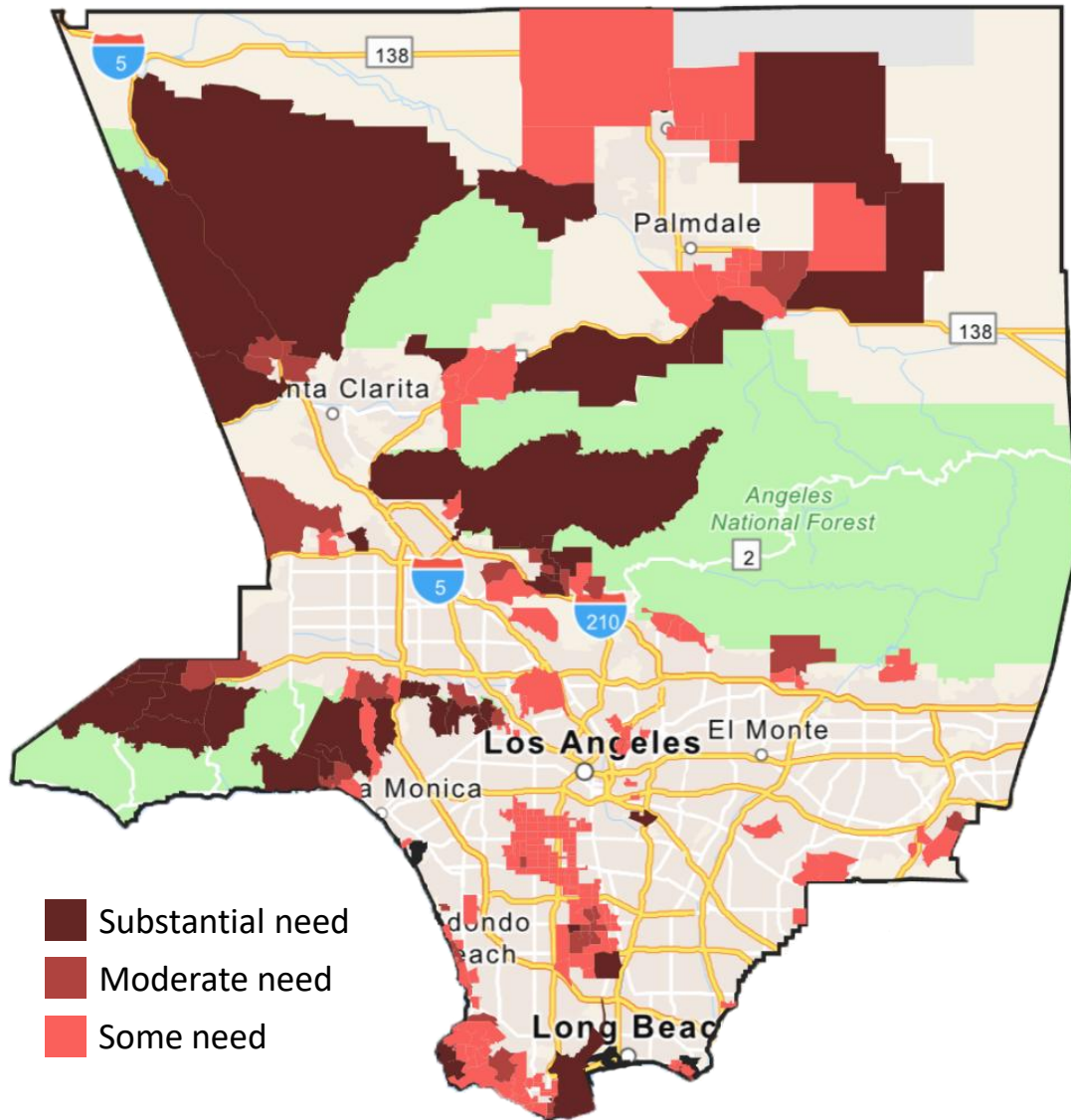
- In June 2024, there were 4,641 dentists in LA County listed as Medi-Cal fee-for-service rendering providers (55% of LA County's dentists)
- Using 2022 per provider data, approximately 46% of LA County dentists provided care to 1+ Medi-Cal patients, and 39% provided care to 100+ Medi-Cal patients

# Dental Deserts in Los Angeles County



- Safety-net clinics are a core source of primary care, particularly for Medi-Cal beneficiaries and uninsured people
- The “dental deserts” in this map (purple and yellow blocks) are areas with many lower income residents but few safety-net clinics providing dental care

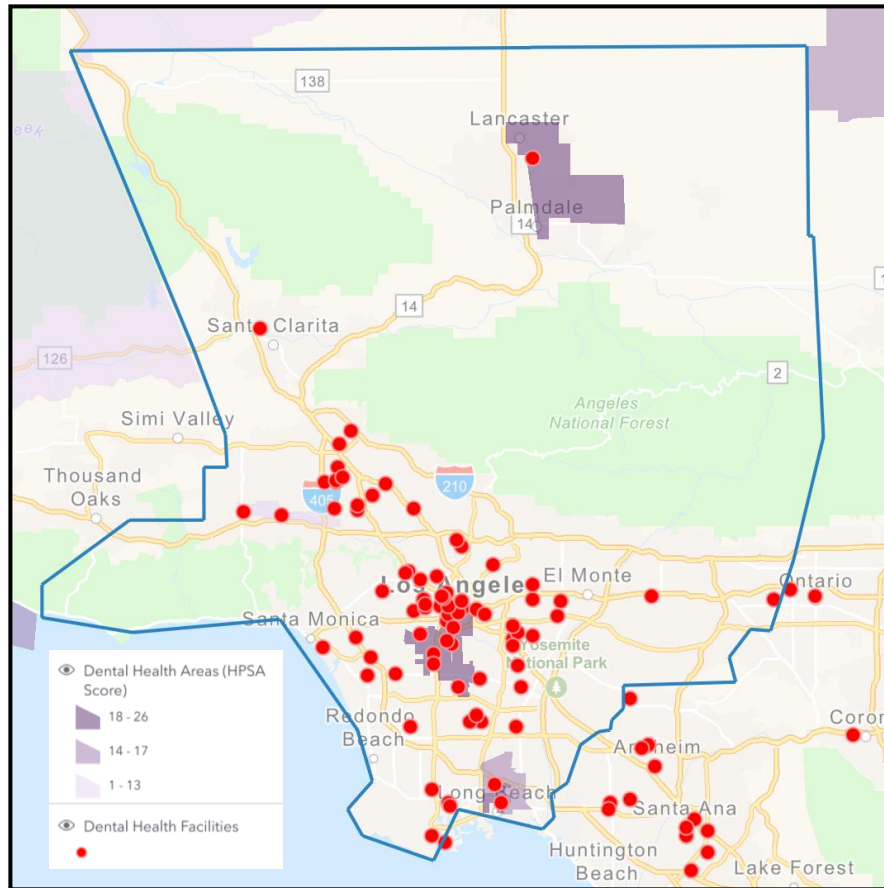
# Areas Needing More Meaningful Medi-Cal Dentists



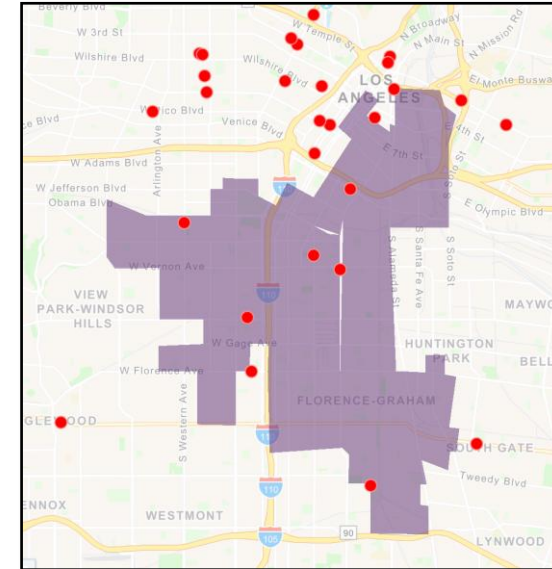
- A meaningful dentist is a dentist that: (1) bills Medi-Cal for \$10,000 or more per year **or** (2) provides care to 100+ Medi-Cal patients per year
- Using 2017 Medi-Cal data for LA County, the American Dental Association, Health Policy Institute mapped the location of meaningful dentists against the number of Medi-Cal enrollees aged 0-20 years. Census tract level results were used to identify need categories based on the number of Medi-Cal enrollees aged 0-20 per meaningful dentist.
  - Substantial need: 4,000+ Medi-Cal enrollees per meaningful dentist
  - Moderate need: 3,000-3,999 Medi-Cal enrollees per meaningful dentist
  - Some need: 2,000-2,999 Medi-Cal enrollees per meaningful dentist
  - Adequate need: <2,000 Medi-Cal enrollees per meaningful dentist

# Federally Designated Dental Care Shortage Areas

## Federally designated dental care Health Professional Shortage Areas (HPSAs) in LA County, 2025



- A dental care Health Professional Shortage Area (HPSA) is a geographic area, population (low-income, homeless, Medicaid) or facility experiencing a shortage of dental care services
- 3 population HPSAs (purple blocks)
- Numerous facility HPSAs (red dots)

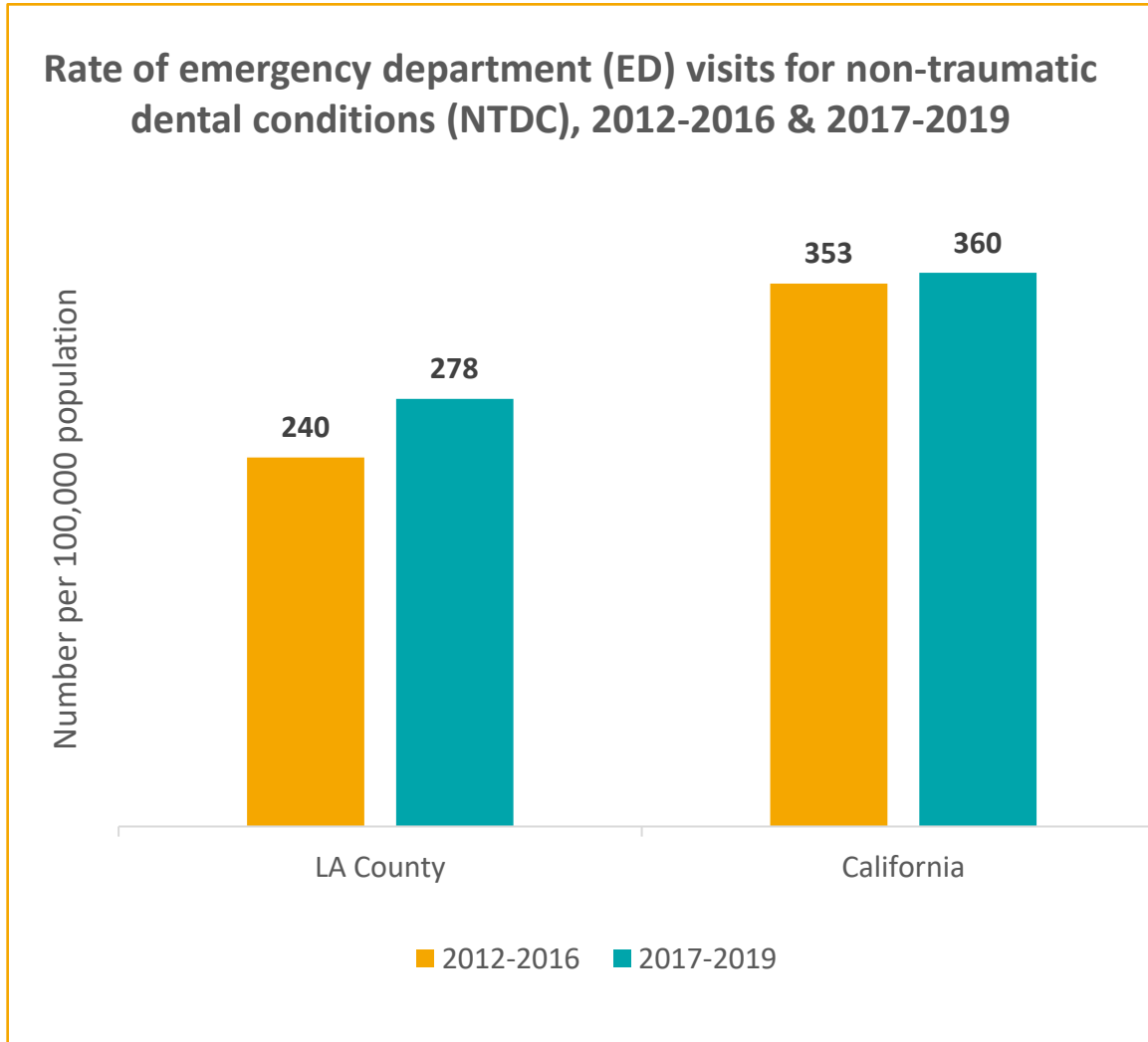




# **Emergency Department Visits for Non-Traumatic Dental Conditions**

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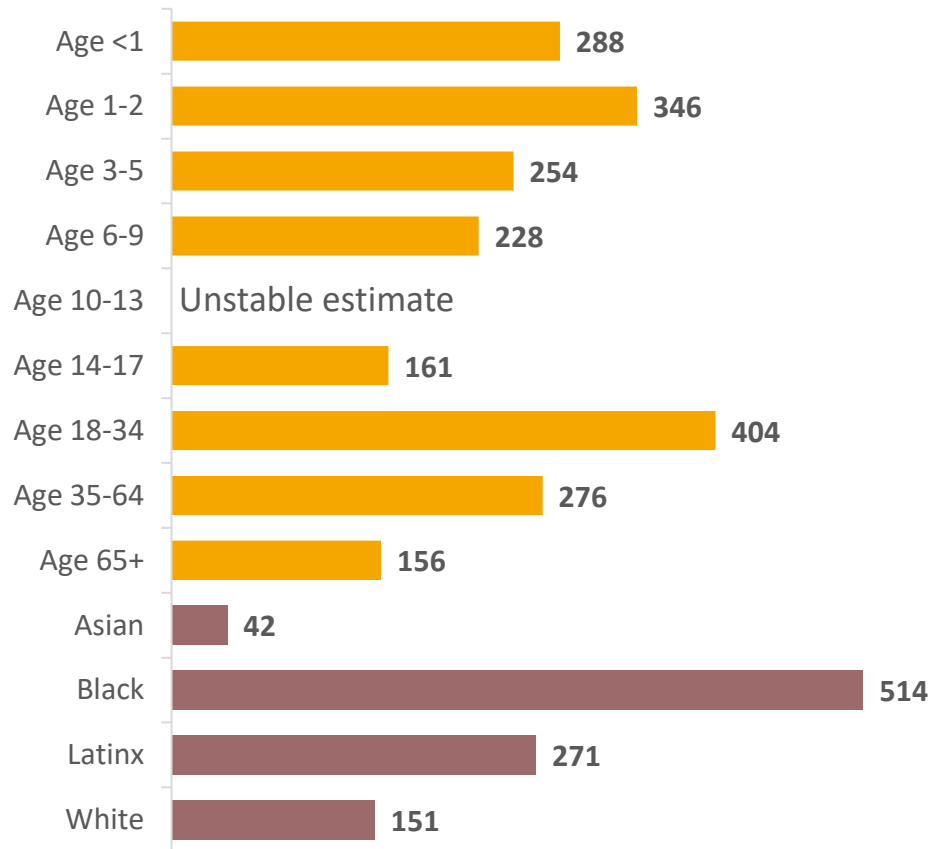
# Emergency Department Visits for NTDC



- The number of ED visits for NTDCs per 100,000 population is lower in LA County than in California
- In LA County, the number of ED visits for NTDCs per 100,000 population increased from 2012-2016 to 2017-2019

# ED Visits for NTDCs - LA County Disparities

Number of ED visits per 100,000 population in LA County by age, sex, and race/ethnicity, 2017-2019



The rate of ED visits for non-traumatic dental conditions is highest among adults aged 18-34 years of age



The rate of ED visits for non-traumatic dental conditions is highest among Black/African Americans

- ED = Emergency department
- NTDC = Non-traumatic dental conditions
- Data Source: Office of Statewide Health Planning and Development. Analysis provided by California Department of Public Health, Office of Oral Health

## Our Vision for Los Angeles County

A community where oral health is recognized as essential for overall health, and where everyone has the opportunity to achieve optimal health and well-being.



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