

# An Evaluation of Parental Dental Insurance Literacy for Pediatric Dental Patients

Jasmine S. Copeland, MHS, DDS<sup>1</sup>; Reginald Salter, DDS, MBA, PhD<sup>2</sup>  
Howard University College of Dentistry – Pediatric Dentistry

## INTRODUCTION

Dental insurance is intended to improve access to care, yet its complexity often creates an invisible barrier for families. Caregivers must interpret confusing benefit structures and make financial decisions that directly affect their child's treatment, often without fully understanding their coverage. As a result, many insured children still experience delayed or underutilized care.

## OBJECTIVES

- Primary Objectives:
  - Evaluate parental dental insurance literacy.
  - Assess confidence vs behavioral engagement.
  - Examine associations with: age, race/ethnicity, education, insurance type.
- Secondary Objectives:
  - Explore implications for pediatric oral health access.

## METHODS

- Study design: Cross-sectional quantitative survey
- Setting: Howard University Pediatric Dental Clinic
- Participants: Parents/caregivers of pediatric dental patients (N=70)
- Instrument: AHILM-based survey
- Statistical Analysis: two-way ANOVA

## SURVEY



## RESULTS

Figure 1. Insurance Coverage. Most participants were covered by Medicaid (87%), with small proportions having private insurance (9%) or being uninsured (3%).

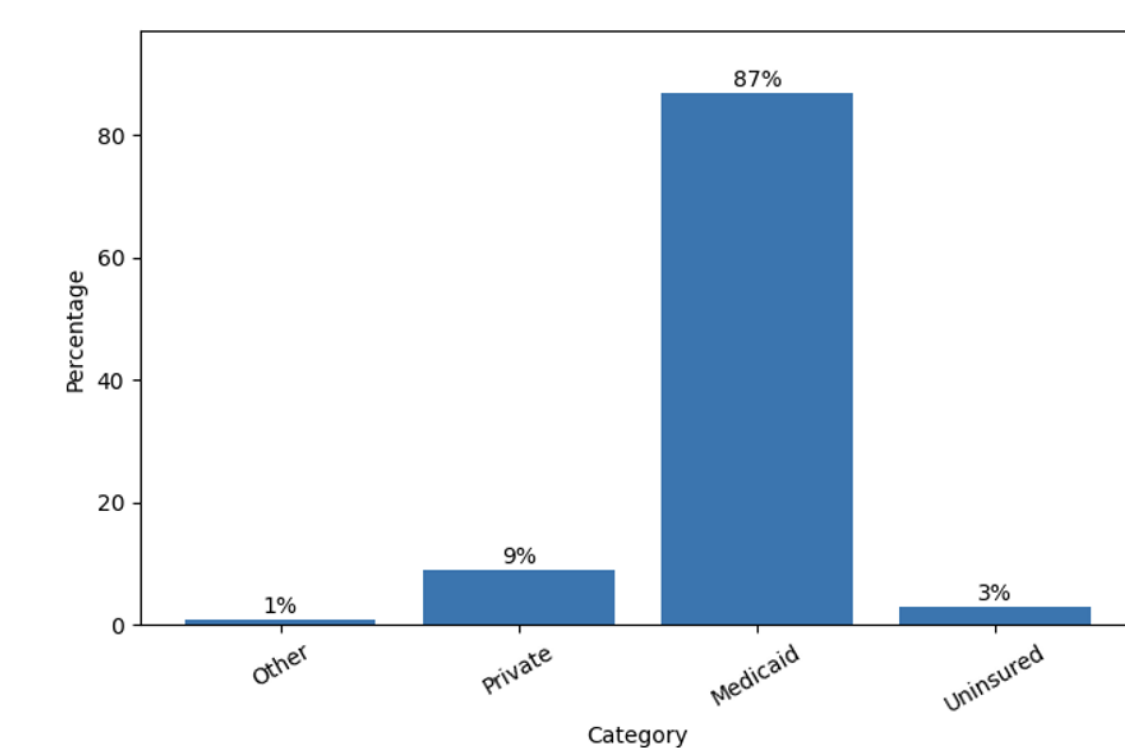


Figure 3. Age Distribution. Participants were primarily between ages 25-44, representing the typical parenting demographic.

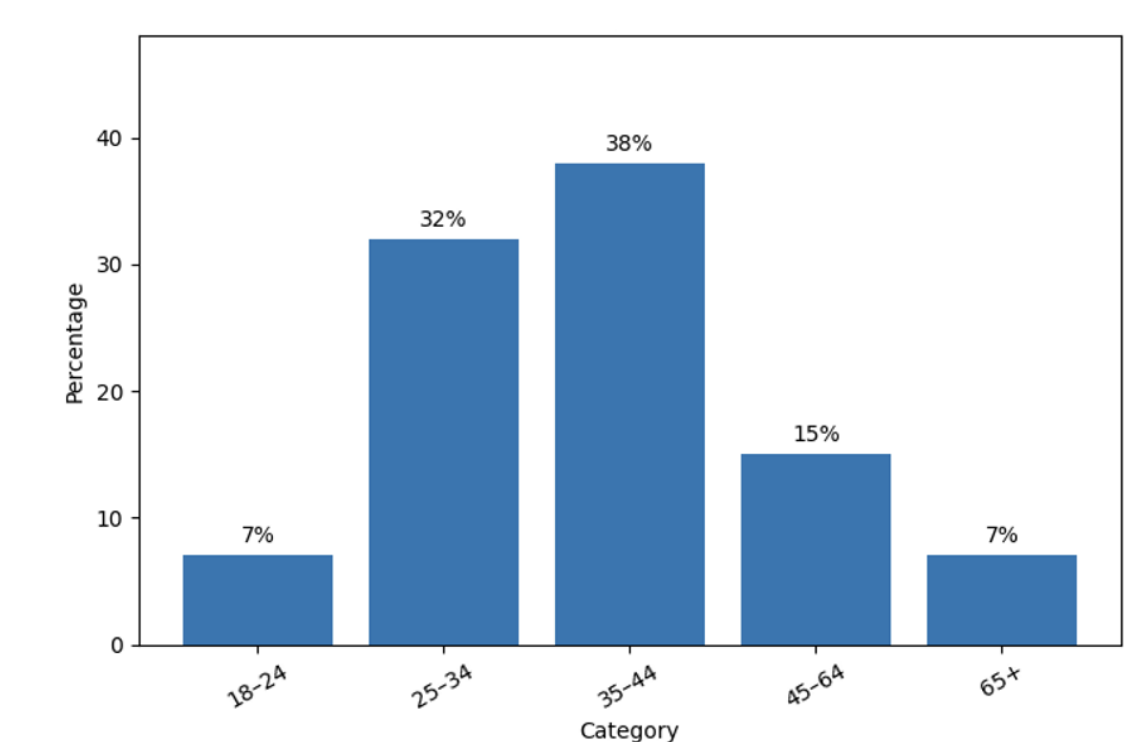


Figure 5. Confidence in Choosing a Dental Plan. Distribution of responses collapsed into Low, Moderate, and High categories.

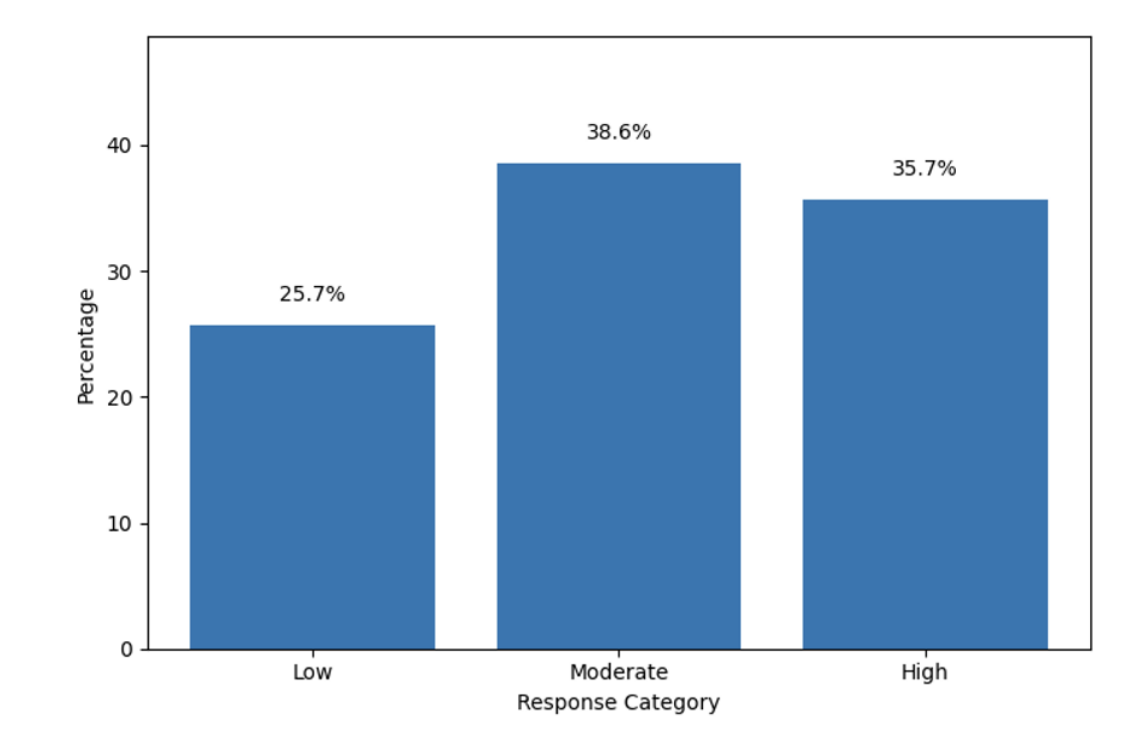
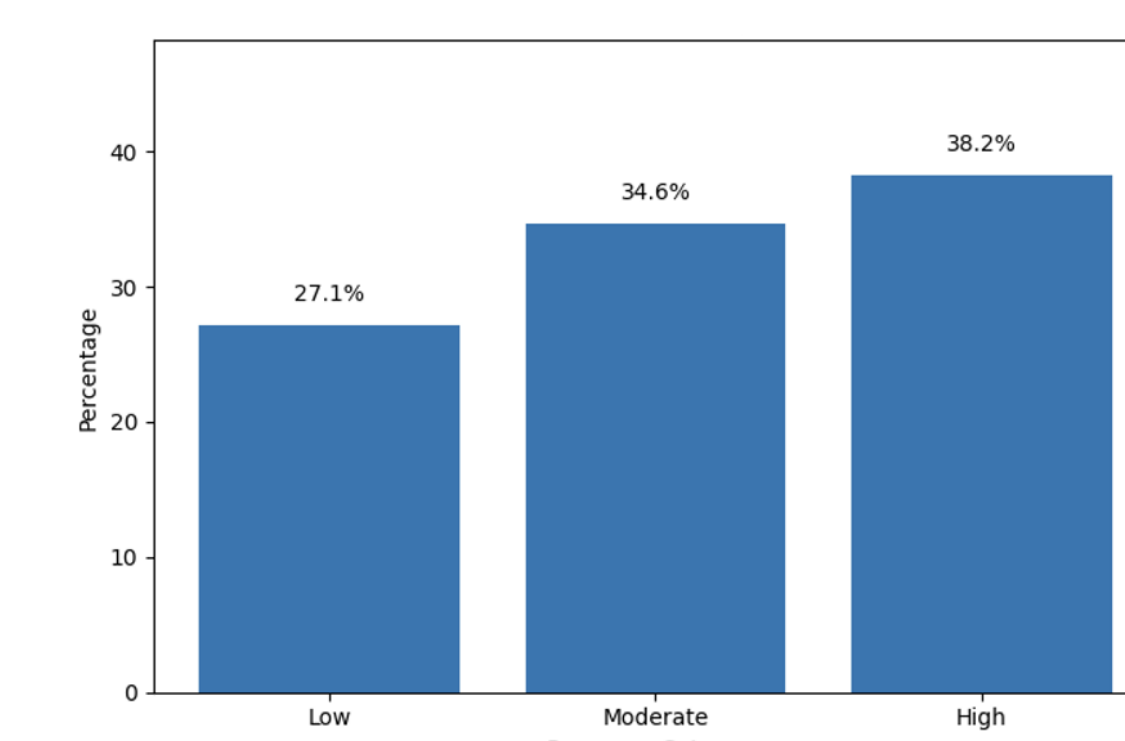


Figure 7. Confidence in Using a Dental Plan. Distribution of responses collapsed into Low, Moderate, and High categories.



### Perceived Insurance Literacy Based on:

Age Group	Mean Literacy Rate (%)	Sample Size (n)
18-24	83.9%	7
25-34	75.7%	23
45-64	73.2%	12
35-44	72.2%	28
64 and older	64.1%	5

Education Level	Mean Literacy Rate (%)	Sample Size (n)
Some High School	79.5%	9
High School Diploma	76.1%	30
Trade School	74.9%	6
Some College	69.7%	13
Ph.D. or Higher	69.4%	3
Master's Degree	68.9%	7
Bachelor's Degree	68.3%	6

Figure 2. Race/Ethnicity. The sample was predominantly African American (82%), with limited representation from other racial and ethnic groups.

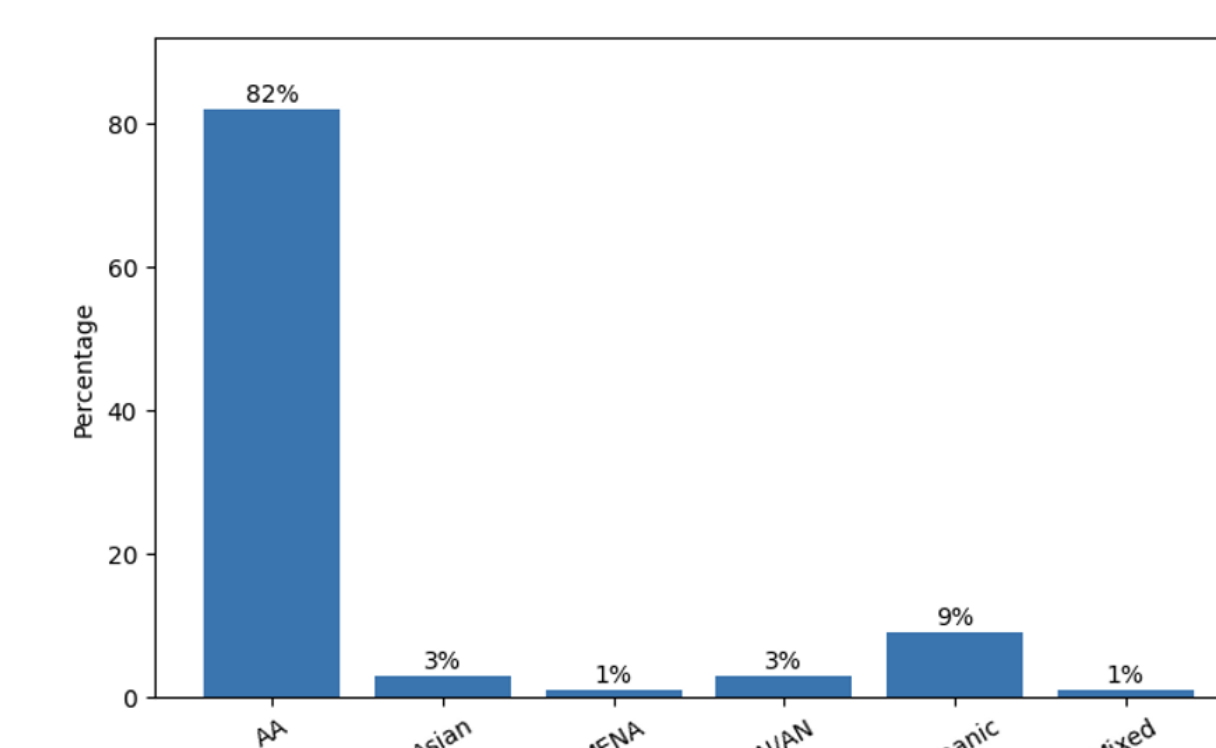


Figure 4. Education Level. Educational attainment was concentrated at the high school and some college levels, indicating moderate overall education.

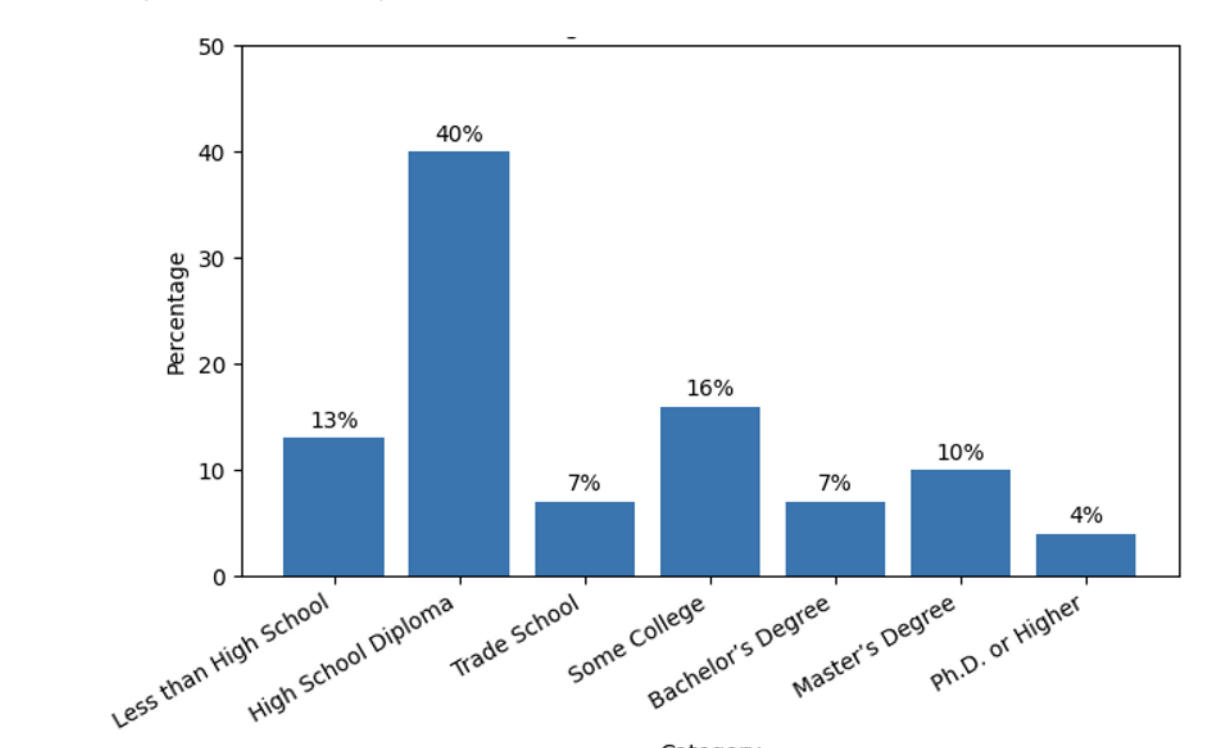


Figure 6. Behavior in Choosing a Dental Plan. Distribution of responses collapsed into Low, Moderate, and High categories.

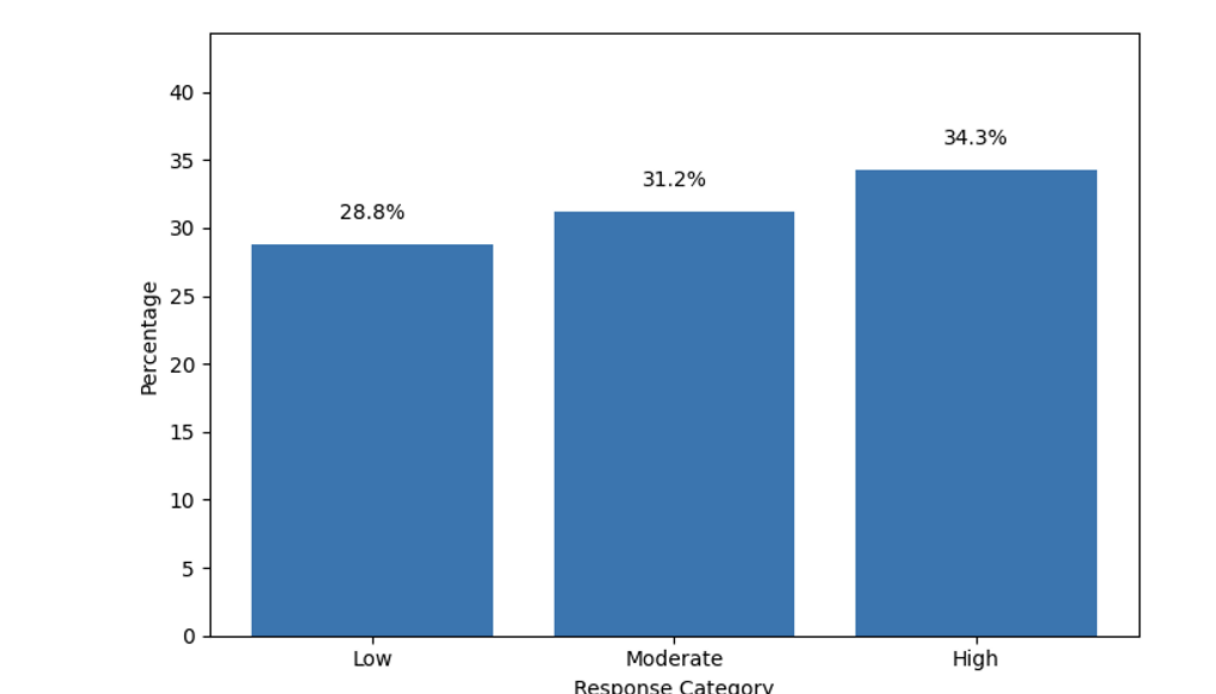
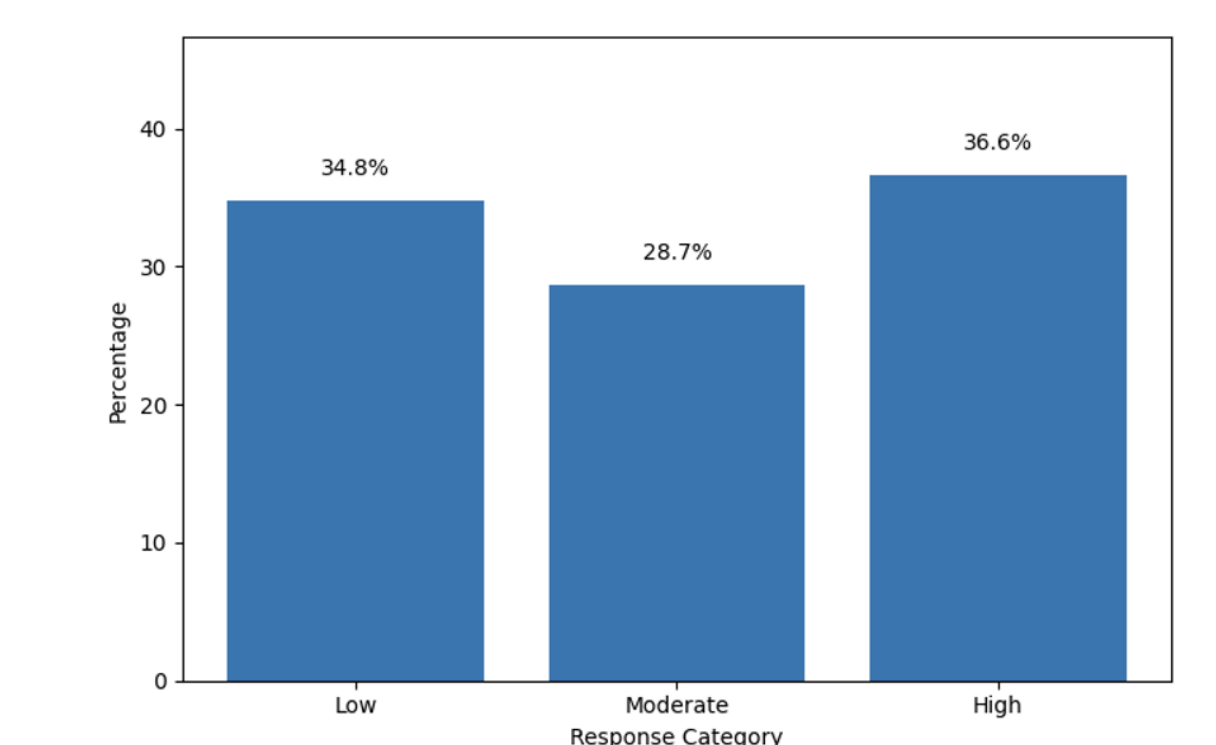


Figure 8. Behavior in Using a Dental Plan. Distribution of responses collapsed into Low, Moderate, and High categories.



Race/Ethnicity	Mean Literacy Rate (%)	Sample Size (n)
Mixed-Race	80.2%	4
Black or African American	75.4%	59
Hispanic or Latino/Non-white	67.5%	7
American Indian or Alaska Native	66.0%	2
Middle Eastern or North African	63.9%	1
Asian	46.5%	2

Insurance Coverage Type	Mean Insurance Literacy Rate (%)	Sample Size (n)
Private Insurance	77.7%	11
Medicaid	74.3%	61
Uninsured	68.5%	2

## DISCUSSION

Findings revealed that perceived confidence levels exceeded behavioral engagement. While parents reported moderate to high confidence in understanding dental insurance, they were significantly less likely to actively compare plans, verify coverage, or effectively use benefits. Education did not predict literacy. This suggests that dental insurance literacy is not just knowledge, but the ability to apply that knowledge in real-world situations. Due to the small sample size and subgroup distribution, many findings were more descriptive and exploratory rather than strongly inferential. The study primarily identified overall trends and relationships within the sample.

## CONCLUSION

- Confidence alone does not ensure effective use of benefits, and limited understanding may contribute to delayed care, reduced treatment acceptance, and disparities in outcomes.
- Insurance concepts should be explained to all caregivers regardless of educational background, insurance type, age, race/ethnicity.
- Improving oral health requires shifting focus from coverage alone to functional literacy & system navigation through targeted education and simplified insurance structures.

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## REFERENCES

