

Table 2: Evidence Supporting the Importance of Availability of Care for Children Needing Dental Care

Type of Evidence	Key Findings	Level of Evidence (USPSTF Ranking*)	Citation(s)
Clinical guideline	<p>The EPSDT benefit for Medicaid-enrolled children provides that if the screening exam warrants it, any necessary referral must be made without delay.</p> <p>Further, states are required to provide any additional health care services that are coverable under the Federal Medicaid program and found to be medically necessary ... regardless of whether the service is covered in a state's Medicaid plan.</p>	III	<p>Medicaid.gov. Early and Periodic Screening, Diagnosis and Treatment. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Early-and-Periodic-Screening-Diagnostic-and-Treatment.html. Updated June 17, 2014. Accessed July 9, 2014.</p>
Descriptive study	<p>More than three times as many physicians have reported difficulty in referring children covered by Medicaid and CHIP to specialty care compared with privately insured children, <i>regardless of physician type and geographic location</i>.</p>	III	<p>United States Government Accountability Office (GAO). Medicaid and CHIP: Most physicians serve covered children but have difficulty referring them for specialty care. June, 2011. https://www.gao.gov/assets/330/320559.pdf. Accessed December 17, 2015.</p>

Note: USPSTF criteria for assessing evidence at the individual study level are as follows: I) Properly powered and conducted randomized controlled trial (RCT); well-conducted systematic review or meta-analysis of homogeneous RCTs. II) Well-designed cohort or case-control analytic study. III) Opinions of respected authorities, based on clinical experience; descriptive studies or case reports; reports of expert committees.