



4200 Innslake Drive, Suite 103, Glen Allen, VA 23060 | Phone: 804.269.8720

**Virginia Oral Health Coalition
Early Dental Home Committee
Tuesday, June 11, 2019
1:00-3:00pm | Richmond, VA**

Attending: JoAnn Wells (VDH), Monalisa Mbaitisi (VDH), Tonya Adiches (VDH), Casey Tupea (DBHDS), Meg Pienkowski (Smart Beginnings Greater Richmond), Myra Shook (DMAS), Julie Duregger (Smart Beginnings Virginia Peninsula), Jane Glasgow (Minus 9 to 5), Rachelle Vo (Hampton Healthy Families), Chernise Harris (DentaQuest), Kristin Gillion (DentaQuest), Patricia Purcell (Family Lifeline)

Staff: Sarah Holland, Brita Bergland, and Lauren Sawyer

Action Items:

VaOHC will

- Identify a speaker for the next meeting to share information about integrating equity and social determinants of health assessments into care interactions. Perhaps someone from the NC Department of Health, as they are piloting a program in the state related to maternal mortality.
- Reach out to DSS, ACOG, AAP, and MCO partners to ensure appropriate voices and perspectives are included in our discussions and decisions.

The EDH committee members will

- Take steps to understand the real barriers to getting dental care through Medicaid (transportation, provider availability, beliefs, time, etc.). Ideas include:
 - Try surveying your organization, community, or clients about reasons that *support* and *prevent* members from seeing the dentist.
 - In your interactions with providers, gauge their (and their office staff's) knowledge and understanding of the dental benefits of Medicaid members.
- Continue promoting dental benefits and educating providers and clients about their benefits.
- Let VaOHC know if you know of local stories to lift up in our grassroots advocacy efforts to promote a comprehensive adult dental benefit in Medicaid. We can help!

Next meeting: Thursday, July 25, 2019 10:30-12:00pm, Virginia Hospital and Healthcare Association (4200 Innslake Drive Glen Allen, VA 23060), Jefferson room (1st floor)

Proceedings

Desired Outcomes:

- Celebrate the end of the PIOHQIE grant and hear preliminary data comparing the three years of Basic Screening Survey results on pregnant women across the state
- Learn about the APP Oral Health Provider Toolkit
- Hear policy updates
- Determine next steps for the committee

Perinatal and Infant Oral Health Quality Improvement Expansion (PIOHQIE) grant wrap-up

- JoAnn Wells discussed the history of the PIOHQIE grant and Virginia's efforts during the three years. The EDH committee served as the advisory board on this grant, and the entire team was able to accomplish so much in these years – congratulations to all!
 - Tonya presented JoAnn with a certificate of appreciation for her dedication to this work over the grant period.
- Monalisa Mbaiti presented the latest preliminary findings comparing 2017, 2018, and 2019 data from the Basic Screening Survey (BSS), given to pregnant women at various maternal and family clinics across the state. They should have the final numbers later this summer. Findings to note, from 2017 to 2019:
 - Fewer women reported having dental insurance before pregnancy.
 - More women knew about the dental coverage in their benefits.
 - More women did not think it was safe to go to the dentist while pregnant.

[AAP Oral Health Provider Toolkit](#)

- Click the link to find excellent customizable resources for oral health providers!

Policy updates

- **EPSDT varnish:** AAP guidelines say to reimburse providers for giving fluoride varnish up to five years of age, but Virginia only reimburses up to age three.
 - CHIPAC (Children's Health Insurance Program Advisory Committee) is interested in taking this on
 - VaOHC will continue to keep the committee updated with any information
- **Medical assistants (MAs) and varnish application:** many facilities have expressed concern with the current Medicaid codes that do not allow MAs to apply fluoride varnish. Virginia only allows physicians, PAs, NPs, and nurses to apply varnish. It could be due to an increase in employment of MAs.
 - The committee sees no red flags with allowing MAs to apply varnish. They are supportive of VaOHC taking on the changing of the Medicaid codes.
 - VaOHC will look into adding this effort as a policy priority - must go through the Policy committee and then approved by the Board.
- **Comprehensive adult dental benefit in Medicaid:** VaOHC's legislative priority for 2020. This issue goes beyond adults and affects the entire family. One CA study showed that children on Medicaid were more likely to receive dental care if their parents also had dental coverage.
 - Dr. Lee is supportive of adding it to the budget as she understands one of the greatest healthcare needs of the Medicaid population is dental care.
 - DMAS Board is going to write a letter of support for this cause - this does not mean it will pass, but it does increase legitimacy and is a promising next step.
 - VaOHC is drafting a letter to the Governor and Secretary of Health about the issue. Once it is online, organizations can easily sign on to the cause.
 - It's important to engage our grassroots efforts and lift up stories from concerned constituents. Legislators need to understand that this is meaningful in their communities and is worth the financial investment.



- If you/your organization are interested, VaOHC can help set up legislative visits, template letters for legislators, talking points, etc. Please reach out if you need any support!
- What has the committee been hearing about the Medicaid expansion?
 - Rachelle: people in her area have been having trouble finding providers that will do dentures - causes eating issues, confidence decreases
 - [Pregnant women on Medicaid get dentures](#)
 - There is a need to educate providers, case managers, home visitors, WIC clinics about the benefits available to pregnant women and children.
 - “Comprehensive” has not been legally defined yet - this will go to the DMAS Dental Committee to decide what comprehensive means.
 - WIC, MCOs, home visitors are great ways to reach pregnant women - we need more of these voices at the table.
 - Encouraging people to prioritize their oral health will incite a change in cultural views, values, beliefs
 - “Going to the dentist is for rich people”

Goal setting

- Brita Bergland shared information on behalf of Wenda Singer (Head Start Collaboration Office): preliminary results from an annual needs assessment survey conducted at 51 Head Start locations across Virginia. 29 grantees responded as of March 2019, and expressed the following attitudes to these activities:

	Not at all difficult	Somewhat difficult	Difficult	Extremely difficult	No org. or providers
Linking children to dental homes that serve young children	60%	30%	5%	5%	0%
Assisting parents to communicate effectively with medical/dental providers	45%	35%	15%	10%	0%
Ensuring parents follow through with dentist’s recommendations for child’s dental care	5%	52%	24%	19%	0%
Exchanging info. on roles & resources w. medical, dental and other providers/orgs re. health care	57%	38%	0%	5%	0%

- The committee aims to understand the **disconnect between providers and patients** - what are the barriers to understanding and utilizing the benefits?
 - Continue educating the providers, WIC clinics, MCOs how to understand the benefits and describe them to their clients.
 - Continue educating patients on their available benefits and how to access them.
- If a client cannot find dental care or a providers, call [DentaQuest](#) (888-912-3456) to help them find a provider and make an appointment. Their list of dentists is real-time and up-to-date.



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- Myra Shook mentioned she could bring this up at the next **DMAS Member Advisory Committee** meeting. These clients (mostly covered through CCC+) know about their covered dental services. She can ask them:
 - How can we increase this knowledge base?
 - How did these people find out about their dental benefits? What linkages should we be lifting up?
- **Goals:** continue to promote dental benefits and proactively looking at the linkages between access to services and knowledge of them