MINUTES

Attending: Patrick Finnerty (Policy Committee Chair, PWF Consulting/VaOHC Board Member); Nia Harrison (Virginia Board for People with Disabilities); Amy Hewett (Virginia Health Care Association, Virginia Center for Assisted Living); Chloe Stanfield (Virginia Health Care Association, Virginia Center for Assisted Living); Chelsi Bennett (American Heart Association); Howard Chapman (Tri-Area Community Health); Tricia Rodgers (Northern Virginia Health Foundation/VaOHC Board Member); Carole Pratt (Office of the Commissioner, VaOHC Board Member); Kathy Miller (Office for Aging Services); Ali Faruk (Families Forward Virginia); Nicole Pugar Lawter (Williams Mullen, VaOHC Public Affairs Consultant); Donovan Caves (Southeastern Virginia Health System); Cheryl Harris Sutton (DentaQuest); and, Ben Hoyne (Virginia Interfaith Center for Public Policy)

Staff: Sarah Bedard Holland and Chloe Van Zandt

Proceedings:

Desired Outcomes

- Develop an informed view of the current state of Medicaid in Virginia.
- Discuss messaging strategies for adding a comprehensive dental benefit for adults in Medicaid.
- Develop plan for next steps.

Messaging Discussion

- The purpose for this meeting is to define a plan for including a comprehensive adult dental benefit in Medicaid this upcoming legislative session. Virginia had incremental success in 2016 with the addition of a comprehensive dental benefit for pregnant women enrolled in Medicaid. This year, there is a positive environment to include a comprehensive dental benefit for all adult Medicaid recipients.
- Sarah Holland shared a presentation with supporting data and stories. (Slides attached)
- Group discussion after presentation-
  - An adult dental benefit could increase the annual net income of a dental office by $15,000 - $20,000
  - A study in Salem showed that, when the VA provided oral health care and treatment to long-term care patients, there was significant reduction in the number of patients with ventilator-caused pneumonia.
  - Department of Medical Assistance Services (DMAS) asked Virginia Commonwealth University (VCU) to research the effect of adding an adult dental benefit (this group also researched Medicaid expansion in Virginia).
  - Franklin County has seen an increase in dentists accepting Medicaid patients in the last two years.
Approximately half of community health centers across Virginia provide dental services. Community health centers lose money while treating patients on a sliding scale.

- If adult dental services were covered on Medicaid, Medicaid dental patients would produce a source of revenue to community health centers based on a PPS rate.
- Free clinics’ most expensive service is dental, especially in rural centers.
- Potential areas of focus: emergency departments, chronic disease, and job readiness.
- Virginia expanded Medicaid in 2019, making 270,000 additional people eligible for coverage. The Medicaid dental benefit, however, only includes an emergency extraction benefit. Medicare, which is entirely federally funded, does not have dental benefits.
- Currently 19 states have extensive dental coverage.

Overview of Virginia State Budget Process

- DMAS and state agencies will be submitting budget requests in the summer and fall 2019. So far, the conversation is going well; those budgets then go to the Secretary’s office for planning and approval, then department of Planning and Budget, then the Governor’s office.
- Each step has a need for advocacy; the more voices the better. In 2019, a new biennial budget is being reviewed so the climate will be apt for more budget changes.

Virginia Environment/Strategy

Politics

- New elections will be held for all 140 members of Virginia General Assembly. It may be difficult to get delegates’ and candidates’ attention before November.
- We can attend town halls and meetings to ask for an adult dental benefit in Medicaid. We don’t know if Democrats or Republicans will be in control of the House and Senate.
- There are currently two dentists in the General Assembly, both in the House. Delegate Todd Pillion of Southwest VA (currently running for the Senate), and Delegate Ibraheem Samirah of Fairfax.
- VaOHC is working with DMAS and VHHA on a study related to dental-related emergency department costs.
- VaOHC Regional Alliances of community-based partners can provide grassroots champions.
- We will not negotiate on populations included in the benefit but rather on services provided.

Fiscal Impact

- Last year, we did not include a budget amount for dental enhancement.
- American Dental Association estimates that once a dental benefit is completely up and running, it will cost $30 million GF. This amount was calculated at pre-Medicaid expansion numbers.
- Dental Advisory Committee successfully created a benefit for kids and is capable of identifying the best way to spend funds to ensure the most efficient coverage (consists of private, academic and state groups).

Action Items

- VaOHC will create three documents and share with the Policy Committee
  1. Internal document: general bullet points with information regarding oral health and specific partners, i.e. American Heart Association, long-term care, cancer, diabetes,
fiscal impact, demographic-specific data, etc. (*include rebuttal points to common arguments*)

2. External document: one page on chronic disease, emergency department info, economic effects (*include graphs and visual representation of data*)

3. Letter to the Governor (*update 2018 letter*)

- VaOHC will develop a timeline for advocacy and messaging.

*Meeting adjourned at 3:37 p.m.*