



Integration Care Model: Women's Health

Pregnant women with periodontal disease are more likely to have a preterm or low birth weight baby. Data shows that African American women are less likely to see a dentist while pregnant[5]; they are also twice as likely to die in childbirth[6]. Home visitors, community health workers, and medical providers can help women have a healthy pregnancy with oral health services, education, and referrals.

Factors to Consider

- **Dental Coverage:** Virginia Medicaid and FAMIS MOMS cover preventive and restorative dental services during pregnancy; yet, many women report they do not know they have dental coverage. If your team sees low-income patients discuss their dental coverage and benefits that might be available to them.
- **Pregnancy Myths:** Dental care during pregnancy is a vital and safe part of prenatal health; however, there is a misconception that dental care during pregnancy is unsafe or that it's normal to lose teeth when you're pregnant. Cleanings, periodontal treatment, and x-rays are all safe for pregnant women, and women can prevent tooth loss with proper care. Use culturally sensitive educational resources to address myths and concerns with team members and patients.
- **Measuring Improvement:** Consider both qualitative and quantitative measurements to assess your integration plan's success, like an increase in dental visits among pregnant patients, at least two periodontal maintenance visits per year, a decrease in preterm birth among women with periodontal disease, and patient satisfaction.

44%

Of pregnant women
visited a dentist in
Virginia



Case Study:

Understanding Patient Populations

A maternal health provider whose patients were predominantly Spanish-speaking and uninsured created a partnership with an urban community health center's dental clinic to provide their patients access to a dental home. The two providers had different workplace cultures, workflow processes, and patient populations. Because trust was not built among the agencies first, the teams lacked confidence in the other providers and patients, and the referral process was slow. The care teams were forced to build trust among the two organizations before the dental providers at the health center could successfully treat the new, pregnant patients. The two care sites worked hard to assess the patients' needs and create a referral system that was culturally sensitive. The resulting program included easier-to-understand referral forms, translation services, and staff training on the safety of pregnancy dental care and cultural humility. The trust among both providers helped their shared patients feel comfortable about accepting a referral for dental care.



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Practical Examples: Leveraging Health Care Services & Referrals

Maternal health and dental providers create a referral system that involves all team members.

- 1** A community health worker helps Susie sign up for Medicaid and arrange an appointment with an OBGYN who accepts Medicaid. When Susie checks in, a front desk staff member asks her screening questions about her oral health and access to dental care, including date of her last dental exam. The screening reveals Susie does not have a dental home and is unaware that Virginia Medicaid covers dental care during pregnancy.
- 2** During Susie's appointment, her OBGYN discusses her screening answers and assesses her blood pressure and other health indicators. The OBGYN looks in Susie's mouth and notes that her gums appear red and slightly inflamed. A medical assistant discusses the ways oral health can affect her pregnancy. The care team takes time to address Susie's concerns about the safety of seeing a dentist while pregnant.
- 3** As Susie schedules her next prenatal appointment, the front desk staff member asks if Susie would like a referral to a dentist in the area and further reinforces the importance and safety of dental care. Susie feels comfortable seeing a dentist because she understands it is safe and that Medicaid will cover the cost; she agrees to a referral. The staff member gives Susie and her community health worker the name and phone number for a local dentist who accepts Medicaid and is in Susie's neighborhood.
- 4** The community health worker assists Susie with setting up a dental appointment, and continues to check in with Susie to ensure she has a plan to complete the visit (i.e. transportation, childcare).
- 5** The dental provider Susie goes to shares a visit report with Susie's OBGYN so both providers can work closely together on Susie's overall health.

